Pathways 13 Conference   
  
DARLENE McLENNAN:   
I just want to welcome you all to ATEND.   
  
(Applause)   
  
GENEVIEVE JACOBS:   
The co-chair, Julie Harrison, at ANU, and Melanie Kovacs who has also been part of the planning of all this in her role as Manager for Inclusion and Welfare at the University of Canberra. Please welcome them.   
  
(Applause)   
  
JULIE HARRISON:   
I am the co-chair and the Manager of Access and Inclusion at ANU. We have lead a wonderful team and committee that has worked alongside us to get everything ready for the Pathways Conference today.   
  
MELANIE KOVACS:   
I am Melanie, former Manager of Inclusion and Welfare. I moved roles five weeks ago, but I now work for the Department of Industry and Innovation in Science at Questacon.   
  
We've had an amazing journey, Julie and I, and can't believe we are actually here - it's unbelievable it is our turn.   
  
JULIE HARRISON:   
In 2014 we took hold of the banner wondering what the two years would bring, and behalf of the ATEND committee we extend a warm welcome to the nation's capital, and to the conference. We welcome disability practitioners, NDCOs, government representatives, professional and academic staff, and most importantly students.   
  
Pathways provides a unique opportunity to improve our knowledge and play digital roles in supporting practitioners in the sector in general, with the opportunity to network, share ideas, show best practice and explore the challenges and changes and choices participating postsecondary education and training.   
  
MELANIE KOVACS:   
Be sure to participate as much as you can, get to the plenary sessions, the conference dinner on Thursday evening, and we especially welcome the vendors with the products you will find most useful. This year we have organised a silent auction, please take the time to have a look at that. They will be competitive bidding, believe me.   
  
Look at the wonderful donated items from other universities, organisations, TAFE, also local businesses. Be sure to bid on whatever you think. All proceeds from this silent auction will be returned to ATEND to support our sector in continued professional development.   
  
JULIE HARRISON:   
We celebrate the 25th anniversary of Pathways this year, exploring the last Odysseus will enable us to look back as the first Pathways Conference in Geelong in 1991 and explore changes in the field of postsecondary education and training or people with disability, and look forward to the challenges and choices of the future.   
  
We hope the conference will bring different perspectives and rich diversity of experience and understanding from you all.   
  
MELANIE KOVACS:   
Canberra is a wonderful place for a conference and it is an honour to showcase our beautiful city to you. We look forward to showing you national treasures on the way to the dinner - watch out for enthusiastic tour guides.   
  
JULIE HARRISON:   
The Disability Advisers Network of the Canberra region. The ACT group consists of only 15 members, a very small sector. We have had two members retire, a change of conference (inaudible), and myself a career move. But we have enjoyed many great and powerful discussions strengthening our friendships. We have found our friendship has grown in the way that we network and is even stronger than before.   
  
As far as our big 15 people in the whole ACT committee, there are 9 of us out of the 15 who went through the whole journey and we have enjoyed every minute.   
  
MELANIE KOVACS:   
We hope you take the time to enjoy Canberra and we warmly welcome you. Please enjoy.   
  
(Applause)   
  
GENEVIEVE JACOBS:   
Ladies and gentlemen, it's time to begin with Drisana Levitzke-Gray, the Young Australian of the Year, given for her passion and dedication at advocating for the human right of deaf people, raising awareness of Auslan, and the rights of deaf children in Australia to access Auslan from birth.   
  
She is employed as a self-employed speaker, and works at Woolworths, works voluntarily on a number of committees, and recently qualified as a deaf interpreter. She is the embodiment of deaf identity, not hearing loss, inspiring the wider community to accept diversity.   
  
She was the first deaf user to fulfil her duties as a juror, and to deliver a TEDx talk in Auslan.   
  
Today Drisana is speaking about reframing our attitudes and perspectives. Welcome, Drisana.   
  
(Applause)   
  
DRISANA LEVITZKE-GRAY:   
Good morning. Hello, everybody. Thank you for inviting me here. I will actually stand. The first keynote speaker for the day and the first of the conference - thank you very much for having me here. I'm really excited to be part of the Pathways 13 Conference.   
  
I was born deaf and I have a lot of experiences in my life journey, especially through tertiary education. Especially last year I studied to become an interpreter. I'm going to talk little bit about my experiences as a deaf person, going through the educational institutions in Australia. Where mostly you are with peers who can hear, peers who don't sign, and peers to use spoken English. Just some background about myself.   
  
Last year I became the Young Australian of the Year, one of only four who received the award in 2015. A huge honour for me personally, and also for the deaf community, because it really put a spotlight on the Australian Deaf Committee and Auslan of the language.   
  
There is a photo there, and my reaction when it was first announced I was a recipient of the award. It's nice to be back in Canberra, because it holds a lot of fond memories for me.   
  
I come from a deaf family, English is not my first language - my second language was Auslan, sign language is my first native language. In front of the photograph, my parents - both deaf and on the top, to your left, my brother Joshua. He was also deaf, and he has two children who you can see in the front - the twins. Both of them can hear.   
  
We were quite shocked, actually, because I am the fifth generation of deaf women in the family on my mother's side, so it is quite shocking to have two children in the family who can actually hear - we didn't expect that.   
  
I remember when they were born in hospital, within 24 hours they had a hearing test and the nurse came in, did the test, I didn't have to say anything. She just gave the sign - the thumbs-up sign.   
  
Firstly this was done on Zachary, and then Ashleigh - she didn't say anything, but gave the thumbs up sign again. We wanted to know what that meant. She said, "That means they can hear - this is a good thing." As a family, she could see we are all deaf - did she mean that being deaf is the thumbs down? You laugh, but it's real, that is the attitude of the wider community, that being deaf is not a good thing, it is negative.   
  
The beautiful parts now is that the twins are almost 8, and Auslan is their first language, so as a family we can communicate freely at home, so we have grown up bilingual and bicultural.   
  
I know six languages myself now, and I'm currently learning two more - Afrikaans and South African sign language. My husband, on the right, is from South Africa.   
  
Some exciting news - we have just recently been married, two weddings in one month.   
  
So deaf people can get married. We are allowed - I thought I would let you know, just in case you are a little unsure.   
  
First wedding was in Perth, on our four-year anniversary. And our second wedding was in South Africa.   
  
So before I go on, I'd like to know what you know. Do any of you know Auslan, or maybe are currently learning Auslan? Hands up.   
  
We have a few people that know some Auslan. Fantastic. That's great.   
  
And I hope that you have the opportunity to learn, because it really is a beautiful, rich language and it belongs to Australia, and it belongs to the community.   
  
I will just show you a few statistics and give you some ideas about deafness and deaf people. How many deaf people do you think are in the world? Hands up. If you could have a guess?   
  
50 million? That's a good number. It's actually a little bit more. Let me show you. This is from 2011 research. They said 72 million people who are deaf in the world.   
  
So you can actually see, there are quite a number of deaf people who live in the world around the globe.   
  
What's it like in terms of deaf people and their education?   
  
80% of those 72 million deaf people live in developing countries. Only 17% receive an education.   
  
And have a look at education, and that the lower number, which talks about bilingual education. What does bilingual education mean for you? Anybody have an idea what that means?   
  
Auslan and English? Correct. So if you were coming from another country, it would be a native sign language and their spoken language that belongs to the country.   
  
I'm one of those 3%. 97% of those people around the world do not receive an education in their native sign language. The 17% of the people that receive an education do not actually receive that bilingually. Usually they are educated through a spoken language.   
  
If we think about a deaf child who can't speak and can't hear, because to receive their education through a spoken language, that's really overwhelming. I received a bilingual education growing up, and that assisted me to succeed in my life, and that's why now I know six and which is why I'm learning two more. And why I became the Young Australian of the Year because I was given the opportunity to reach my potential, so I am passionate about making sure deaf children receive an education in a native sign language.   
  
  
So how many percent of deaf children are born to parents who can't hear? This is the answer here, I am one of the 5%, because my parents are deaf. 95% of deaf children are born to parents who can hear.   
  
So the theme of this conference is about changes, challenges and choices. So firstly I would like to focus on changes. Within our field of work, whether you are working as staff, students, practitioners, you go through changes, especially now with technology. I mean, technology has certainly changed the world, and if we don't change we are certainly disadvantaged to fall behind.   
  
Change is not easy, we know that. And often it can be very difficult. I admit, sometimes we get fed up with changes.   
  
With my husband, both of us travel around the world for work, we may live in one city in another part of the world, we move to Australia, we move here and there. Sometimes I get fed up with all the changes. Sometimes you embrace change because of the work that you do.   
  
In the disability sector, change is very exciting, especially as a person who is deaf and who works within the sector. There are a lot of perspectives on change. Changes aren't easy, but they are important.   
  
I'd like to talk about accessibility versus reasonable accommodation. The question for you is to think about accessibility versus reasonable accommodation.   
  
If we think of the context of a classroom, you may have a deaf student, a teacher who can hear and speak in English, and they are providing an Auslan interpreter in the classroom. Is that accessibility? What do you think, yes or no?   
  
I can see a few nods, and who thinks it is accessibility, having an Auslan interpreter in the classroom? Put your hand up if you think that equals accessibility. Who thinks it is reasonable accommodation?   
  
It looks about half/half for those questions. With my presentation, I want to give a perspective of myself as a deaf person, also on behalf of the Deaf community and their perspectives. And this may apply to other disability groups, but I can really only speak for myself as a deaf person.   
  
This is my opinion and my perspective, I use Auslan, and the information from the teacher comes to you from an Auslan interpreter, I don't have direct access to the teacher. I have an interpreter, it is mediated communication, but certainly not direct access.   
  
Maybe the interpreter lacks some direct knowledge. They do their best, certainly. But it would be better if you had direct access, if the teacher could use sign language as well.   
  
That is why we need to have more deaf people to work as teachers, not just as teachers of the Deaf, but in mainstream classrooms as teachers, teaching different subjects.   
  
That is one example, that is reasonable accommodation rather than being accessed. I was involved in the Diploma of Interpreting last year, to become an interpreter, and that was totally accessible to me.   
  
All of my teachers, whether they could hear or were deaf, were signing in class. There were 14 students who could hear, a number of deaf students. We had direct access to the teachers, and for the first time in my life I did not miss information, I was part of the classroom 100%. I could interrupt or interject when I needed to and have conversations as I needed to. This doesn't happen in mainstream classrooms.   
  
I was always behind, I had to check, I was receiving information through a third party, an interpreter.   
  
For people working in the field, you need to think about what you are providing to students. Is it accessible? Can we make sure it is more accessible? Can we provide reasonable accommodation? We need to acknowledge that reasonable accommodation is what we can provide. But we need to be clear about what we are providing students, whether it is accessibility or reasonable accommodation.   
  
In terms of accessibility, quite often it is an afterthought, not included in the original plan or the project or conference.   
  
If I can give you one example, I quite often fly for work. And quite often go with Qantas. I may want to have a look at the in-flight movies, they are rarely captioned. There are two or three that are captioned, so I have limited choices.   
  
People who can hear, you pay for what you get. People who are deaf do not get the same opportunities as people who can hear.   
  
At one time I was flying about six times a week, and because I am from Western Australia it was hours and hours on a plane. I only had three movies in one month to choose from that were accessible to me.   
  
Most of the in-flight movies did not have captions, and that is an example of it being an afterthought. So Qantas, for example, put that content into their planes, and yet they did not think about accessibility issues.   
  
When I made a complaint, the answer more often than not is about funding. I said, why don't you delete all the movies without captions and make it fair, so that people without a disability are viewing the same thing?   
  
You might not acknowledge this as an issue because it doesn't affect you, but it certainly affects me and people like me.   
  
I hope in your workplace you have a plan for making things accessible. For example, if you have conferences, make sure you have the budget so you can provide Auslan interpreters, captioning services.   
  
And another issue I have, as a motivational speaker which is a lot of work. I have noticed in the last few months when people ask me to present, we talk about all types of things like the speaker speed, and when they realise they have to provide Auslan interpreters, they withdraw from the offer. They say they can't provide an Auslan interpreter for me. So my business suffers.   
  
That is because accessibility is an afterthought. As a motivational speaker, I should be able to work where I need to work. It should be irrespective of being a deaf person. I should have accessibility.   
  
Challenges. One of the important thing is for all of us to remember is not one size fits all. I prefer to use Auslan, it is my first language, but not all deaf people want the same thing. Some deaf people like captioning services, some people like to have note takers. Not all people are the same, not all people with disability are the same.   
  
You need to bring them all together successfully.   
  
I faced a lot of challenges within the educational sector, especially if the environment had mostly people who could hear it. A lecturer would lecture, I would access that through an interpreter, but I could not write notes at the same time, because I could not look down at the same time to write notes, I would need information from the interpreter. So I would also be supplied with a note taker.   
  
Deaf people have to work twice as hard to keep up with our studies. I certainly remember in high school, I would go to class, and when I would go home I would have to catch up on the readings I could not access in the classroom.   
  
I also had a tutor who could self assess and sign, so I could receive assessment in my first language.   
  
I was working at McDonald's after class. It was a lot of work. I think we need to work with students to make sure they receive the support they need to thrive.   
  
Sometimes we think that people with disabilities can succeed, and that is true, but it can be very, very exhausting. We need to make sure they have the right supports to help them.   
  
The third word is choice. I think I actually prefer the word opportunity. I don't believe there is a simple choice, I believe there is an avenue, or many avenues of opportunity available to people.   
  
There are opportunities to improve in the workplace, to improve in the support we give to people, to improve in our relationships, especially within the disability sector. I think we need to be more aware and knowledgeable about things happening in the sector, and people with disabilities. It is about reframing our attitudes.   
  
Our attitudes and our perspectives will actually have an impact on our actions, which will then have consequences.   
  
Often, if I have had negative experiences it is often from people with very poor experiences of disability. Wonderful experiences quite often come from one person who is very open-minded. They may not have all the knowledge, but they certainly give it a go. That has been my experience.   
  
As Genevieve commented earlier, one of my big focus areas is certainly about deaf children and the right to access sign language from birth. This is another example of opportunity. Are we giving the parents and the deaf children a choice? Which is usually the choice of speaking and listening, or are we giving them opportunities?   
  
Are we telling them about Auslan, are we giving them opportunities so children can reach their potential? I think we currently have those opportunities available to them.   
  
If there is one thing I would like you to take away from today it is about reframing your attitude and your perspective. As a Deaf person, I am very proud, I can't imagine anything else in my life. If there was a magic pill to make me a person who could hear, I would never take it. This is who I am, the beautiful world I belong to. Auslan is my first language, a beautiful, rich language.   
  
Sometimes I feel sorry for people who have missed out on the language I have, the information I can take with me through my whole life, from my native language. And as a person who is deaf, are you aware of how we feel about ourselves? About our own culture?   
  
That is one thing I would like you to take away from today, about reframing attitudes. This is true, the only real disability in life is a bad attitude.   
  
Thank you very much.   
  
(Applause)   
  
GENEVIEVE JACOBS:   
Thank you so much, Drisana, so impressive. It prompted us to mention to you that you can access captioning, of course, here at the a conference. Please refer to page 18 of your booklet, and captioning is available on smart devices. We have a couple of questions - put your hand up and grab my intention, if you have something you would like to ask Drisana. Anyone?   
  
I would actually like to ask you myself, Drisana, you describe such layers of difficulty in accessing education and tertiary education, what do we know that means about deaf people's career outcomes and learning outcomes?   
  
DRISANA LEVITZKE-GRAY:   
It's very interesting really. There is a lot more accessibility provided for deaf people in tertiary studies. From BA is right up to Ph.D.s more accessibility and more opportunities, but it's not always satisfactory accessibility for many deaf people, including myself, I avoided going to university myself because I knew I would be the only deaf student in that area and not everybody would understand my way of life, my needs, my language, my culture.   
  
I have been accepted into different universities - University of Western Australia, and also Gallaudet University, the only deaf liberal arts university in the world, in Washington, DC. I was really excited about that, because I know there are thousands of deaf students there - I am not on my own. But the cost? It's something I can't afford.   
  
So I had to accept and think about the options I have, and think about University here in WA. I got accepted into the university, but the barriers before it even started, I was talking to the University about the provision of interpreters, which they said they did do - they provided them for classes and lectures.   
  
When I looked at Gallaudet University there were many after class groups that students could get involved in which would be accessible to me, because everybody in that university was using American sign language.   
  
At the University of WA, I asked if they would provide interpreters for social groups that sit outside the class? Groups run by students. The University said, no, we don't - we only provide them for the class. I thought there you go - that has a huge impact on me already because I can't access the university experience. They need to be there 100%.   
  
GENEVIEVE JACOBS:   
Does that mean across the deaf communities worldwide, that many more people are in low-paying or low skill jobs simply because those access issues have been so significant?   
  
DRISANA LEVITZKE-GRAY:   
Hmm... It's not easy to answer, I can't say a straight yes or no. But you are right, I think deaf people do suffer in the type of limited educational experiences they have, which then leads to the type of job they can get. This starts from a young age. If they had access to education through a natural language, that would be a better outcome.   
  
Because the education system has failed many deaf people, it certainly has had an impact on the type of job they can take. If we have people like myself who have had a good education, have good skills, and if the attitude in the wider communities was better, then it would certainly help.   
  
I have certainly applied for many, many jobs, but if they see the word 'deaf' on the application, many people are not interested - it is in the too hard basket because they don't know how to communicate with deaf people.   
  
So there are a lot of factors and barriers that really have an impact. University life can be quite different and is made more difficult for deaf people, and certainly for myself - I tend to bypass that, because I realised it would be very difficult. I want to set up my own business. I would love to go to university one day, when I have the time. Two weddings in one month was enough - I need a break.   
  
Maybe when I have time I will try, but there are a lot of factors that make it difficult for a deaf person to access freely.   
  
GENEVIEVE JACOBS:   
Are there any other questions? Yes, down here. I have a microphone for you.   
  
QUESTION FROM FLOOR:   
What other perils between a person who was limited to sign language communication and potentially SLA speakers, and foreign talkers, and if you yourself came to university and gave it a talk, and how these two systems might be treated differently.   
  
DRISANA LEVITZKE-GRAY:   
That's a good question. At the same time, I wouldn't put deaf people in the same category - deaf people who access the systems are usually from Australia with different life experiences to somebody who may have moved from another country.   
  
Deaf people are already bilingual. Whereas people who have come from another country are still learning English as the language but you are right, we need to look at how provision of support is provided for both groups, and it can't be a one size fits all.   
  
We need to think about those overseas students - they need to learn English, for example. For deaf students, I think that students have good English skills, but they need to access information or education in their first language, which is sign language.   
  
So you certainly can't compare the two groups in some ways. And certainly deaf students here use Australian Sign Language, Auslan, and we need to concentrate more on them as a separate group to the spoken language group. I hope that answers that in some way.   
  
GENEVIEVE JACOBS:   
Drisana, it has been just so interesting to hear your experiences, to learn about your part. Thank you very much for showing that with us and congratulations to on your Young Australian of the Year award.   
  
DRISANA LEVITZKE-GRAY:   
Thank you.   
  
I have to leave early today - I hope to meet you at morning tea.   
  
GENEVIEVE JACOBS:   
Our next keynote speech comes from Jessica May, founder and Chief Executive Officer of the innovative web-based Enabled Employment. Enabled is a labour hire company for people with a disability, and Australian Defence Force veterans wounded by the service. It is unique in Australia, and possibly in the world, with its approach of using flexible arrangements to enable that employment does take place.   
  
They use remote work, they implement agency models, they use cloud technology, to make finding suitable work and employees for both employers and employees.   
  
Jessica has a very impressive and long CV, so long I can't run through it all at the moment, but it includes the Prime Minister's Award and the 2015 Chief Ministers Award for Excellence and Innovation.   
  
The also has the National Telstra Business Women's Award for Start-Ups in 2015, and an award for excellence in community organisations.   
  
You'll have to Google her yourself later, but please welcome Jessica May, to speak about why it's time for some commonsense in employing people with a disability.   
  
(Applause)   
  
JESSICA MAY:   
Thank you so much, and good morning, everyone. I think I will be a good follow on to Drisana, because the most of the things I'm going to talk about today is treating people like a human being, asking what they want, what they need, and what are their best opportunities for success in any situation?   
  
There was a TEDx talk and they were a bit excited, because Stella Young had done a talk about, "I am not your inspiration," and it was the most watched TEDx talk in the world. They came up with the message - 'just ask'. It didn't go down well.   
  
They had forgotten the human being factor - it's not just ask them, but treat them like an everyday person, a person you are meeting. Say hello, how are you, you can become friends with them, and talk to them first about themselves.   
  
The main concern was people from the community saying, "I don't want to be walking down the street and 20 people going, hey, how are you? Hey, did you get your disability?"   
  
You don't go in and ask personal questions - you need to establish that relationship first.   
  
But I think I need to talk a fair bit about who I am and why I am here, why I found I'm enabled to implement it and why I work in that sector. I am a person with a disability, I have had it my entire life. I have always had severe anxiety.   
  
My first memory is of mum asking what ice cream I would like and me going, "The 20 cent one" Because Mum didn't have the money.   
  
But unfortunately I was sexually assaulted by my maternal grandfather when I was four. My anxiety is to disassociate, you remove yourself from your body and interactions, so whenever I have a panic attack, I look like I have gone to sleep, or I completely disengage. That's my anxiety.   
  
I have managed it my whole life with medication, psychologists, and I have had a fantastic career - it never hindered me, because I didn't have to disclose. I wanted to worry about other people's problems, not mine. I had a fantastic career, aged 30, executive level, ran a program, 17 staff, everything going fabulously.   
  
I had my daughter in 2011, and as with any women having children, it changes life. But it had a huge effect on the - postpartum anxiety. The symptoms of anxiety. And my resting heart rate was 180 bpm. Whenever I stood up I felt like I was going to faint. I was already anxious, and everything just spiraled. So I felt I had to go back to work straight away.   
  
I was workaholic, I'd asked my doctor if I could go back. She said only three days a week. A few of you here would know about, graduated return to work programs. I had to do one of those, so all of a sudden everybody knew my personal history. Everything about me. Team members, managers, staff… I was the talk of the office.   
  
I went from somebody who was somebody really well respected, to be seen as the most incompetent person in the room. How did that happen? I had worked with these people for 10 years. How does one is a bit of information change their interaction with me, the then think that I can't do my job?   
  
They didn't want to stress me out, so they took away my old team. They moved me to another area. I was doing pretty much executive assistant roles. My complaint, their solution was to take everyone who was on a workers compensation claim, or who have a disability, and put them all in my team. And group them altogether - that was the response.   
  
I ended up with eight people, four of them who had bullying complaints against each other.   
  
(Laughter)   
  
JESSICA MAY:   
That's what happens. I was an under performer, I had a team that didn't get along… In the end I got them getting along and they were really productive, and they couldn't believe I could manage to do that with my condition.   
  
The main thing I learnt from that was assumptions. I am a big believer that assumptions are the reason for nearly every single act of discrimination. Most people aren't intentionally trying to be horrible. But they don't want to offend you, so they don't ask and they make assumptions about what you need. Then they put those assumptions on you.   
  
For me, I needed more work, or responsibilities of they should have given the two teams to manage, for projects, and then I would have got better. But because it everything away, I got worse and worse. I started looking around for solutions for people who were highly skilled. Not all people with disabilities are entry-level, and that comes onto the next thing.   
  
Everybody in this room would know, 4.5 million people in Australia have a disability - the 20% of the population. The largest minority group in the world, and the only minority group you can join at any stage of your life. But we are not doing more for it, and we are making these assumptions and putting people into pocket.   
  
How can 20% of the population only be able to do entry-level jobs? That's what I found, the disability implement providers focus on entry-level, a place in the job, but if you don't take the job they give you, you can lose your benefits. How is that about progress in the future? Which is one of the reasons I came up with Enabled Employment.   
  
Another thing was the big myth about it, that disability only fits these different boxes. I think there is a lot to be said for charity and the portrayal of what disability is. What is the sexiest disability so we can make money?   
  
As Drisana has said, 90% of disability is invisible. There are people in this room, you would not go. But we are working 100% to fit in. And we shouldn't have to do that, that is the premise behind founding the business.   
  
The biggest stereotype disabled people face, we will have to do more work, change the office, but it is untrue. Disabled people are just as productive, if not more productive. They have less sick leave, less workers compensation. They know their limits, they will not burn out their mental health, they will not get there again.   
  
So we really need to be taking advantage of that, that is the whole premise of Enabled Employment. We set up an online recruitment portal, it is all about self service, we don't charge candid, we charge businesses. You should be paying for a qualified person to come into your physical business.   
  
Just because they have a disability, why shouldn't they have the same opportunity? Why aren't they as worthy as the next person with their skills and qualifications?   
  
That is the main difference with us, we chose to be a for-profit company to try to instigate social change. If there is more competition, there are more services, more opportunities, and more outcomes for people with disability.   
  
It also challenges those attitudinal myths and stereotypes straight out. Currently, disability service employment providers pay you for taking someone with a disability, if someone was paid to take on me or you, would they think you were a great find, or would they think you had less capabilities?   
  
People with disability should be valued for who we are. So one thing we did learn throughout the process, because of the way we engage people, what we do for the teams before they start, and that person. There were lots of other groups facing the same discrimination, and our results were working for them as well.   
  
We found that was veterans, if they had been wounded psychologically or physically, and even just veterans transitioning from military to civilian life. It is a really mentally stressful process for them, we work with them to make that happen. We have recently expanded to include Aboriginal and Torres Strait Islanders, and seniors, people 55 and over. We break all of it down before the person starts.   
  
The biggest thing we do is try to fit in with what businesses need. We are not going to throw people at you, saying, "You should find a job for them," we look for people with the skills and abilities for staying in the job. That is where we really try and focus.   
  
Touching on disclosure, proud participation, and if anyone knows the answer yell it out.   
  
We were talking about reasonable adjustment, asking the person. Stephen Hawking is doing his tour, he is going to be at the Opera House. What do you think we would have needed to set it up?   
  
SPEAKER:   
Ramps?   
  
SPEAKER:   
(Inaudible)   
  
JESSICA MAY:   
See, you guys are listening. I normally get ramps, carer, certain hotels, accessibility, software. But you know what happens when you ask him? "Do a hologram, baby!"   
  
He was a hologram on stage for his world tour. He was filmed where he was most comfortable, but could do a world tour, projected on-screen as a hologram.   
  
Think about the impact on him, by him actually designing it. I think he is a great example, he is one of the people, you can't challenge his intelligence because of his disability, he immediately swats that down.   
  
I think it is an amazing tool for people who don't understand the disability sector. It is one person in the celebrity view they will never challenge.   
  
I have got another example, a practical example about reasonable adjustment and accessibility. I was going to talk about Sharon, one of our staff members. An amazing award-winning journalist who used to work with the Prime Minister with Islam communities, during 9/11, a lot of the terrorist attacks, she has written a book about it. Amazing.   
  
She has got a disability, spinal stenosis and post-traumatic stress disorder. When I met her she thought she was basically unemployable. She does not sleep, "I wake up in the morning and everything is ready to go."   
  
She had a stick, a cup of coffee, she can't do both, and would ask a lady to open the door for her. Do you know who made a complaint? Yep, she was sick of having to get up and open the door for Sharon. The whole office went into a tailspin, meetings, how are we going to change the buildings, we need to get sliding doors, it already meets the accessibility requirements for disability, this is unbelievable, what is the solution?   
  
Let's move Sharon to another building, completely away from her team. She used to have to travel with a trolley and stick for about 600m between two offices, it was they wanted to treat her like everyone else. She is completely excluded, sitting by herself in another area. And Sharon said, if they had asked her, "If you could get me a five dollar shelf from Bunnings, put it next to the door, I would be able to put my coffee on it, open the door, and do my job."   
  
There are really, really simple solutions, and 95% of our requests are about flexibility, times, when they start, when they finish, how they manage their condition.   
  
What we do, the biggest difference before someone starts, we make sure everything is in place that person needs. We ask them, what do you need to perform in your job? To get the best outcomes? And we make sure that happens.   
  
The people in the team come to us, ask their stupid questions, get it all out so they don't discriminate, when the person starts it is all about them doing their job, and that is it.   
  
We do short-term placement, full-time contracts, long-term things. 90% of the people we have placed are still in their jobs today two years later. Because they were qualified for the job, they could do the job. They were not told what they should be doing.   
  
I would like to wrap that up in a nutshell, talk about what that has meant.   
  
Fortunately, as I say, it has been successful. We have 12 major corporate contracts, we are working with government departments, and challenging and breaking those myths everytime as we go ahead. We have had some massive achievements, recognised as finalists for Australian of the Year this year, Telstra Businesswoman of the Year, and we were recognised as the most innovative business in the world.   
  
(Applause)   
  
It is the first time it has ever been done, but that is coming back to why. I went looking for it, should have existed. Commonsense. I needed the service, why wasn't it there? Everyone is like, "That is a no-brainer." But it doesn't exist anywhere in the world, and that is something we need to start challenging.   
  
We should not just be asking the people with disabilities, we should be asking everyone, what do you need to succeed in your job? That person is immediately part of the team, not excluded by their preferential treatment.   
  
It is about how do you make the most inclusive environment for everyone, and make sure that they will work together? I think that is probably how I would like to finish off, I think I have not gone over time. (Laughs)   
  
(Applause)   
  
GENEVIEVE JACOBS:   
Jessica, that was quite amazing. I'm sure we will have questions. Pop your hand up, we will bring the microphone to you. Down the back here.   
  
QUESTION FROM FLOOR:   
What a terrific presentation, thank you very much. I am a Ph.D. student studying the barriers to higher degree by research for people with disability. I would just like to ask you, with so many things that happen in life with attitudes towards people with disability, how do you remain positive?   
  
JESSICA MAY:   
We have got a mantra at our business, everyone up I'd buy it. We kill people with kindness. Sometimes you walk out of a meeting like, "Really?"   
  
You have to take one negative opportunity, and instead of letter bring you down, because it came, it can cripple you, you can take that opportunity and figure out how to use it to help millions of people. I always think that when I see horrible discrimination, some of it from the people you would least expect.   
  
Normally when we meet with the Diversity and Inclusion Specialist in a business, we know we will have a bad time. That is because they have got KPIs about meeting gender diversity, lesbian gay and gender diversity, but no KPIs about disability, so they don't care.   
  
We keep at them, send them links, information, constantly hitting at them. Most of the time they come back after three months and say, "We realised after speaking with you we don't have a very good plan, we are not doing the right thing, what can we do?"   
  
GENEVIEVE JACOBS:   
Do we have more questions in the room?   
  
QUESTION FROM FLOOR:   
I don't want to give the impression that at our university we don't give a lot of support to students who need it, but one issue we have is students coming through who think they need a heap of support, wanting things we think they could do without. We worked consciously with trying in our work practice to understand they can do things differently, or another way, than the way they have got. How do you work with that?   
  
It is an embedded sense of their own inability.   
  
JESSICA MAY:   
I think we probably do exactly the same as what you do, we ask them what they need to perform the best in their job, and then we work with them to make realistically what we can happen happen. Sometimes, we have got an example where we could not get a screen reader for someone, they were working for a government department, it does not have the inbuilt screen reader.   
  
She could access those documents on the iPad, to be able to use a screen reader on that. We also bought her a screen reader computer, things like that. It is thinking outside the box.   
  
She was like, "I have to have this screen reader." But it was physically impossible, you have to upgrade the computer system to have it.   
  
It is about thinking outside the box, negotiating on what you can do. We work to deliver everything within our capabilities for them, but it is a dialogue. We talk about expectations and what we can deliver, we make sure they have everything they need to be able to do the job.   
  
GENEVIEVE JACOBS:   
Just on that, I was wondering when you spoke about the double-edged sword of disability funding and the charity mindset. The idea we are doing people a favour by giving them a job, how hard is it to change that paradigm when it is such a powerful one in the way we approach disability?   
  
JESSICA MAY:   
The biggest thing we do, our staff are reflective of certain groups we represent. When we meet with people, we already challenged their stereotypes immediately by meeting with them. We have got people with disabilities, veterans, spouses of veterans, they all have seen first hand, they don't think they can engage with the community group unless we have a good idea of what they have been through.   
  
They tell us... Stories, we are sitting in front of them, challenging these things, thinking, they have all the disability. Next thing is making them pay for it, making them realise the value of it, if you pay for something that you value it, that is probably the biggest impact that has on that, that is changing that way we deliver service. Because we give them the skills to seek a job, and we compete on the open market, we want to put the person in with everyone else, and we have about a 40% fill rate.   
  
So our candidates are qualified for the job.   
  
GENEVIEVE JACOBS:   
That is such an exciting model, really wonderful to hear how exciting it is. Thanks Jessica for a really wonderful presentation.   
  
Final keynote in this opening section comes from David Fintan, Branch Manager for Government, Quality and Access for the Department of Education and Training, CAMRA where he manages equity and (inaudible) systems for higher education. He has held all the positions at the NDIA, including Chief Risk Officer, corporate counsel and corporate secretary. Prior to his current life as a public servant, he has spent 15 years in public service, including partner at DLA Piper. He's going to talk about changes in higher education.   
  
DAVID FINTAN:   
Thank you very much. I have incredible shoes to fill after two wonderful and inspirational speakers, you have to spend half an hour with a mild-mannered public servant and reformed lawyer. I would like to acknowledge the traditional owners of the land on which we meet, and pay respects to their Elders past and present, and extend that respect to any Aboriginal and Torres Strait Islanders who are with us today.   
  
As was just noted, I David Fintan, Branch Manager of Quality Access and Governance Branch at the Department of Education and Training. Among other things, one of the important jobs we do is manage the range of equity and access programs designed to help people with a disadvantage, including people with a disability, access and succeed in higher education.   
  
At the recent AFR Review Summit on higher education, our Minister, the Honourable Simon Birmingham noted that in a modern education network our objectives are higher than ever before. In the last 30 years, the proportion of 25 to 40-year-olds participating in higher education has grown from 12% to 37%.   
  
As a result, we face responsibility to educate and produce graduates who are prepared for a greater range of opportunities, including further study, but importantly work.   
  
This throws up huge challenges, including financial sustainability. What I want to focus on today is the work we are doing to try to get policy settings right. That's a very different perspective, I guess, from what you have heard already. We are not so much engaging in our Department with individuals - people with a disability at a individual level - but we try to get the policy settings right, mostly that means the way we deliver funding to provide higher education. To create the right incentives the system can achieve, the ambitious objectives we are setting.   
  
Firstly, I want to have a quick look at - to give some context - where we are at the moment. Secondly, I want to consider where we are going, the kind of objectives that the government is setting. Thirdly, and hopefully of most interest to you, look at some of the things we are doing to get there.   
  
In some ways the timing of this conference and my being here is good. In some ways, bad. I think it's good because there are a number of really important things in train at the moment that I can speak to you about, including the work the government is doing to develop the higher education reform package. The work we are doing to evaluate various programs, including HEPP program, as well as the National Committee Coordinators Program, and some of you have been involved in providing this, changes that have been made to the disability support program following the evaluation in 2013.   
  
All that is really good. The unfortunate thing about the timing is, I am not in the position to announce any big or bold changes to any of those things, but I can fill you in on where we are going to, with the hope that at the beginning of next year, as part of decisions on the government's overall higher education reform package, we can announce any of the things that are happening to the other programs as well.   
  
As I said, firstly, I want to cover some context. Where are we now? Over the past six years, the number of students with disabilities participating in higher education has grown markedly. In 2009, 32,156 domestic students with disability were enrolled at public universities.   
  
In 2015-16, six years later, there were 56,246 students with disability enrolled. That's a pretty amazing increase of just under 75% in six years. Over that same period, the total number of domestic students enrolled increased by 27.6%. So you can see, while there was a huge increase overall, largely attributable to moving to the demand for a system, the increase in the number of domestic students with disability was growing at a much faster - or has grown at a much faster rate.   
  
This, of course, is a really pleasing achievement. And while no doubt some of that could be due to to greater disclosure, and students with a disability who are already participating in higher education, I think it is still a move in the right direction.   
  
Having said that, there is obviously still much more that needs to be done. Over that same period, the success rate for students with disability has been around 5 percentage points lower than for all domestic students. The retention rate has been around three percentage points lower,   
  
While the number of students participating has increased, the success rates and retention rates are still lower than for the rest of the student population.   
  
The next thing I wanted to touch on as part of context is the experience of students with disabilities. The university experience of WA, run by our department shows a broadly speaking students with disability are satisfied with a university experience, although I will touch on later evidence that is somewhat contrary to that.   
  
In 2015, the level of satisfaction was around three to four percentage points lower than other students, with respect to skills Department, learner engagement, teacher quality, learning resources. And also students with disability were slightly more satisfied with the student support services offered by the University.   
  
The final part I want to look at in getting the context is job outcomes. Sadly, in the same ways success and retention rates are the new level, the number of students in a disability finding full-time employment, and also the salaries of people with disability graduating from higher education, are lower than for the rest of the student population.   
  
In 2013, 69.2% of graduates with disability who were available for full-time employment found it within four months of graduation. By 2015 this figure had fallen to 6.2%.   
  
This decrease may be partly explained by the rise in the proportion of graduates with disability seeking full-time employment, which by itself would be a good thing. In 2013, 30.7% of graduates with disability were seeking full-time employment, and by 2015 43.8% were doing so.   
  
Among those seeking full-time employment, (inaudible) percent were not working, up 12.5% from 2013, and 23% were working part-time or casually in 2013.   
  
I think that gives us a picture of some improvement, but still considerable improvement to go.   
  
The second thing I wanted to touch on briefly is where we are going. One of the other things that our minister said at the Fin Review summit was that in taking equity of access to higher education is a non-negotiable policy for this government. This doesn't mean simply funnelling more students into higher education - it also means making sure that students who enter higher education get good outcomes.   
  
I have pointed out, there is a lot more work we can do there. Institutions must be able to enrol students in courses that are appropriate to their aspirations and their preparedness, which can allow for progression for further study and for jobs.   
  
The challenge the government has set itself, and in the department, is working to ensure we get the policy settings right to achieve that.   
  
Now I move to the third and final part, which will go for the longest because there is a lot to say, about some of the things we are doing to get there.   
  
On higher education reform more generally, a lot of you will be aware that the government has been working for many months to develop a package that will help make the higher education system more sustainable. In May, around budget time, the government published the Driving Innovation consultation paper, over 1200 submissions in response to that.   
  
The government now has also appointed an expert panel to help advise on and review those submissions. With a view to developing reform that can commence from January 2018, which means hopefully some announcements at the beginning of next year. Because we will have a lot of work to do, you will have a lot of work to do to get that in place for 2018.   
  
I was going to talk about the higher education participation program next, I might actually leave that. If I forget, please remind me to come back to it.   
  
Next I want to talk about the changes that are being considered to the disability support program. Many of you would be aware that the disability support program is designed to give supplementary funding to universities to help them meet the cost of providing funding to students with disabilities. Of course, universities themselves have obligations under disability to termination legislation, but also under the higher education standards framework, which for anyone who does not know is effectively the requirements that a higher education provider needs to me to be registered as a higher education provider.   
  
They do assessment of how universities will support any students, including students with disabilities.   
  
The budget for the disability support program is around $7 million per year, of course, having more money would waste be a wonderful thing. The challenge we have been set by government at the moment is to work on reforms that will essentially need the same bucket of money, but use it in a different way.   
  
Having said that, I don't think we should ever discount the possibility of or ignore consideration of how more money could be officially used, as well.   
  
To illustrate the challenge of how we use that manage, in 2003... Sorry, 2005, the total value of eligible disability support claims was about 4.3 million dollars. That meant about 80% of claims being made.   
  
The idea of the scheme is not 100% of costs, 100% supplementary, in 2005 it meant 85%. In 2015 the value of eligible DSP has increased from 4.3 million to 9.9 million, and the available funding was there for 61% of claims.   
  
That illustrates the size of the challenge, I hope it also illustrates that this is not something government alone can cause or solve, government needs to work with universities and with others, so that together we can provide the support that is necessary for students with disability.   
  
The 2015 evaluation of the program identified a number of areas for improvement. There were two in particular I wanted to highlight, because they feed into the changes we are now considering. The first is that the evaluation acknowledge the administrative burden of the program, and the inefficiency of the programs.   
  
The evaluation found that universities are spending large amounts of time fielding claims where the majority of those items are for relatively small amounts. 57% of claims accounted for 6% of the total funds. There is a huge imbalance there.   
  
The government, in a administering that money, would also be adverse to it.   
  
Secondly, the evaluation findings about the range of activities that should be eligible for support using program money, the review found that the DSP was successful at helping students overcome difficulty they rated as most important, such as completing exams, participating in lectures and tutorials.   
  
It also found that other activities would be of assistance, including staff training, to support the increasing number of students participating in higher education, increase the disability confidence and awareness of teachers in particular.   
  
It also found that modifying course content and the teaching materials, and the way in which those teaching materials would be given would be an effective use of the money and valued by students with disability.   
  
Recently, we released a discussion paper, which was looking at some of the things we are hoping to do with the program to give effect to the evaluation. And I wanted to cover a few of those.   
  
Now, the first... Probably the most significant change is to move from a claims based process to a formula based approach. The formula would be based on the number of students with disability enrolled at a particular university. This program is for public universities, KLA universities. The two things we hope that would do would be increase the efficiency of the program, reduced the burden of claims for small amounts of money. And give universities predictability in the amount of money they would be getting to meet the needs of students with disability.   
  
It may be possible through that process to provide funding earlier in the year, but that is an administrative thing on our end.   
  
I think a formula based approach grounded on the number of students enrolled at an institution is a pretty reasonable starting point for a formula, you have reflected the number of kids with disability the university is supporting. Having said that, we also know, this has been pointed out to us in the submissions resulting from the consultation process, that that approach is not perfect.   
  
This is the challenge of getting the policy settings right. We are operating at a level where you can't possibly take account of each potential variable, but we are trying to get the policy settings right so we come as close as possible to meeting all of those needs in the most efficient way.   
  
A few things we are aware of, we know not all students with disability disclose their disability. Which of course is going to skew the numbers that for Miller is based on. And we also know that amongst the student population, there is huge variation of need. Low, medium, high need, and that is also not reflected directly in a formula based approach.   
  
I think it is worth acknowledging that, because while starting with the number of students with disability is a very reasonable starting point, we do acknowledge it is not perfect, and that it has to be improved.   
  
The other thing I wanted to point out, which I think is really important, and I think this emphasises another point I have been making, which is that this is supplementary funding, a shared responsibility. These changes are not being considered in isolation to anything else going on.   
  
For example, the HEPPP, higher education participation and partnership program, provides funding year to year. One of the commission programs, done through government, is to investigate the nondisclosure of students with disability as well as Aboriginal, Torres Strait Islander and English as a second language background students. In order to support greater disclosure.   
  
We are hoping that through that, there will be greater rates of disclosure, to help make the policy settings we are developing more accurate, more efficient, and more likely to achieve the objectives. That project is being undertaken by the University of New South Wales going into next year.   
  
I thought it would be worth mentioning that, it is not as though it is something in isolation. We are considering a range of things that can be done.   
  
The other thing canvassed in the consultation paper is expanding the range of additional or eligible activities that could be... That program money could be used to support. I mentioned some of those before, including technical training, and modified course content.   
  
We have had some feedback on them, and no there could be some adverse implications from doing that, in particular concerns being raised that by expanding the range of activities we covered, there is a risk that the limited pool of funding will spread even more thin.   
  
Now, having said that, it is worth pointing out that the real object of doing this is to respond to the feedback we got through that evaluation process, students with disability and the things they would value.   
  
But also to give universities flexibility, it is not as though universities have to spend program money on the full range of activities. It is there to supplement spending they are ready doing to support students with disabilities. It is not meant to increase the pool, it is meant to increase flexibility.   
  
It supports universities to take up their responsibilities, this funding just assists them.   
  
What are the next steps? The consultation process closed at the end of last week, I think we have received 20 submissions so far. If anyone is interested and has not made a submission, I invite you to come and talk to me, to any of the people from the Department here. While the formal process is closed, we are always interested in hearing your views.   
  
We are going to review all of that with the government, give some conclusions. I think it will be part of a package it does across higher education.   
  
I think it is one of those consultations, I would like to say it is a genuine consultation, it is not just a tick box, we have already made up our mind. We have evidence based reasons coming out of the evaluation for what we have put forward, but we also acknowledge that there is always room for different ideas and improvement.   
  
We welcome that, we are very happy to engage with it. I also wanted to mention quickly the evaluation of the NDCO program. I know some of our NDCOs are here with us. That program, for those who don't know, funds 31 NDCOs across Australia who have the important task of engaging with stakeholders in their region, bringing together providers, people with disability who want to access and participate in higher education.   
  
A consultant has recently provided us with a draft report, that we are considering. For that reason there is not a lot I can say, the timing unfortunately means I can't say a lot. One thing I can say, which sadly won't come as a surprise, because I think it implies some of the things Jessica told us in the last session, some of the feedback we got was that people with disabilities who had taken part in the evaluation spoke of experiences of being bullied by teachers, being patronise by government service providers, and being made to feel guilty about their own disability.   
  
Disability and support workers in general have a lack of empathy and awareness, this is something Jessica touched on. I am looking around so I know where you are, I am sure you are still here.   
  
Overall, employers lack empathy and encourage people with disability towards the narrow field of education and employment options.   
  
Clearly that is something we all need to address, because the idea of students with disabilities participating in higher education isn't to just get any job - it's to have full equality of opportunity and full access in the same way that any person does. And that is something we will certainly be thinking about and pursuing as part of the evaluation.   
  
The final thing I should mention, which I said I'd come to last, which isn't disability-specific that I know many of you will be interested in, is the evaluation of the HEPPP. As most of you know, it is being currently evaluated, and the outcomes of the evaluation will inform the government's decisions about the higher education reform package on how to fund equity and access programs.   
  
The HEPPP provides wanting to universities to help people proceed in higher education, which can include students with disabilities. Between 2010 and 2015, 4%, or 107 of the 2, 679 projects were directed the key at students with a disability. It also funds the apps on National Centre for Student Equity in Higher Education, which itself funds competitive research grants.   
  
We will hear later from Sue Trinidad and Ian Cumminghame in the work they have done in summarising the results of the research for students with disability. We actually had a session at the National Centres Forum on Monday, which was dedicated to looking at the work that needs to be done for students with disability. I won't steal the steal the thunder, but I think that was a really useful session, but it provides an opportunity, and Matt Brett encouraged me to do that when reporting back on the table of work, students with disability belong in higher education. Because even within equity groups generally, there is sometimes a perception that students with disability the poorer cousin.   
  
So we took the opportunity to emphasise that, and the work you will hear from the Centre is really important, valuable, and provides an opportunity to continue to deliver that message, but to continue to direct funding to projects that will increase our understanding and help us to develop even better strategies, approaches, supporting students with disabilities.   
  
I'm not sure how I am going for time, because I don't bring me watch today, but I need to wind up, so I will. If there is time for any questions, I'm happy to take them, but if not, I will be around for morning tea and delighted to talk to any of you.   
  
(Applause)   
  
GENEVIEVE JACOBS:   
Thanks, David. There were some questions about how I would wind people up and that is the most direct approach to say stop talking. Questions from the floor from people they would like to pursue further with David? Put your hand up and we will get a microphone to you. Yes, a question down here.   
  
QUESTION FROM FLOOR:   
Anny from the University of Adelaide. I am concerned about comments you said about the DSP not increasing funding, given that you talk about the has been an increase of 75% over the last six years, the trend is upwards, and is going to the exponentially. We have two issues here, I think, what is ethical, the rights of students with disabilities to be involved in higher education. Secondly, our legal obligation. I would be interested in your thoughts about how we can make that many continue to support our students when there is no increase.   
  
DAVID FINTAN:   
I don't have the answer. Except to acknowledge that the parameters we are working in a moment don't allow for an increase. And it's something that… I'm trying to think of something useful I can say, without repeating what I have already said, but it is difficult.   
  
It is there to supplement what universities provide themselves. Having said that, I acknowledge what you are saying, if there is an increasing numbers of students with disabilities and therefore an increasing costs of supporting them, then if that money is not increased, someone is going to have, with the money. I can on it, it is a challenge, the parameters we are working with don't allow for an increase, but we are certainly hearing what universities are saying.   
  
GENEVIEVE JACOBS:   
Just a follow on from that, you are talking about the effective use of that funding, and the kind of mindset that operates in both government and tertiary institutions about how it is applied, try to shift that to ideas about formula rather than to endless processes. You think there has been a mindset problem in both government and institutions, about how the funding can be applied?   
  
DAVID FINTAN:   
Quite likely. In my mind, and I have only been around higher education in seven months, it strikes me that it is directed in a way that is based on claims, it will be seen as something that needs the cost of the plan, as do something that meets the overarching responsibilities of… I should say not just universities, but the governor has a role in this as well, supporting the needs of students with disabilities to achieve all those aspirational projects we are setting.   
  
I'm hoping to shift to form an would opt to change that mindset, but acknowledge it comes with huge challenges as well.   
  
GENEVIEVE JACOBS:   
you also have the need of a big picture. There is a disparity between access to education outcomes in terms of full-time implement. There are questions about what institutions can do about resolving the issue.   
  
DAVID FINTAN:   
Yes, we constantly receive feedback from universities, not unfairly, the university don't control the labour market and therefore can't guarantee employment. Having said that, there is obviously work that universities and government can do to target high education to those courses, to those fields of study, but most like to support jobs.   
  
Having said that, we also want to make sure, as I mentioned and as Jessica mentioned that we are supporting the jobs people aspire to, not those of the been available in the past.   
  
GENEVIEVE JACOBS:   
Thank you very much indeed for your time.   
  
(Applause)   
  
GENEVIEVE JACOBS:   
OK, ladies and gentlemen, it is time for a cuppa and a break that morning and afternoon tea and lunch will be served in the foyer. Don't go just yet. I have a couple of things to say. Stop fiddling around with your handbags. The other two procedures in for you and also in ballroom 4 - and I will just tell you what a couple of them are doing.   
  
The text tell, providing assisted learning solutions for people of all abilities, visual impairment, English-language learners, those learning English as a second language.   
  
And also the Australian Indigenous Mentoring experience, also speaking at concurrent sessions, who are a dynamic education program supporting Indigenous students from high school, into university employment and further education.   
  
I will tell you more about a number of those other exhibitors at the other stages during the program, and representatives are available at the break comes.   
  
But for the very first time, the conference organisers are running a silent auction. The auction items are on tables located in the foyer outside the ballrooms, and with each item there will be a printed running sheet where you can record your name and place a bid. Other people can come along and bid more - you can get competitive and say this is where you are doing your Christmas shopping.   
  
The person with the highest bid wins, the auction is open until tomorrow, and the process will be returned to conference funding, so it could be a nice way to get something a bit special, a bit unusual for Christmas, and to help us, the Pathways Conference.   
  
If you're going to the ATEND AGM, held in National Ballroom 1 at 4:45, just before the welcome reception. The welcome reception is to celebrate the 25th Jubilee, and there will be cake to mark the occasion.   
  
We are about to split the ball into three for concurrent sessions after morning tea, and will be back as a whole after lunch for the key note address is. Biscuits and a cuppa await. You have half an hour before the concurrent sessions begin at 11 AM and we will reassemble after lunch.   
  
(Morning tea)   
  
  
SPEAKER: If one of the players who has Down Syndrome, his first touch down. So we took that YouTube and added caption to see it and put it on our Facebook page. That clip had a staggering reach of 28 million people that's greater than the entire population of Australia. The original YouTube caption had 129 views.   
  
The success of this caption clip, once we add add captions to it but it wasn't done just for the hard of hearing people but it was made accessible to everyone everywhere.   
  
If we talk about accessibility for students in university we need to talk about how accessibility benefits all students. Not just students with disability. I'm sure you will all agree accessibility benefits everyone.   
  
Access ramps are not just there for wheelchair users. Elevators are just not there for people with mobility issues.   
  
Likewise, captions an transcripts aren't just beneficial for students who are deaf or hard of hearing. They benefit students with learning disability - ah, there are captions.   
  
They benefit students with learning disabilities, autism, dyslexia and so on. Captions benefit beyond disability. They benefit the mainstream.   
  
We have, e- specially if you look at international students where English is the second language. We have filled a financial model that shows providing captioning and transcription to all students is actually profitable for universities.   
  
Ai-Media are working to bring accessibility into the mainstream, just like Facebook did for the main video. It biggest opportunity to make tp available for all people is to make it mainstream.   
  
Here you can see the live captions. They will be happening throughout the three-day conference. You will be able to watch them throughout your mobile device. In your conference pack there is a little flyer that tells you how you can view those captions and also in the guide, there is a QR code which you can scan to view the captions on your mobile device.   
  
Thank you very much. Enjoy the conference. Thank you.   
  
SPEAKER: Thank you Marcus for some thought-provoking material. Our next keynote speaker is a truly inspiration al Australian and an old friend of mine, too. We have just had a sat fieing chat about wombats in the foyer. Jackie French is an author, historian, she is December lek I can. She is patron of literacy programs across Australia with a wide and deep and sometimes accidental experience in learning methods and their xhout for students as well as a passionate advocate for equal opportunity community. Her work has won 60 awards or over in Australia and internationally. She is a lover of wombats children and vegetables. She wants team read, and she is filled with ideas. She was the 2014 Australian lawyer yet, 2015 Senior Australian of the Year. She still can't spell but today she speaks to us about why everything person can read and why every person must read. Welcome Jackie.   
  
JACKIE FRENCH: We probably need to add to that introduction that I can't read those captions. OK. Who has got a disability?   
  
I accepted the role of laureate four years ago after meeting a young boy at St Vincent's Hospital. It was one of those completely unexpected things. At 9 o'clock at night my husband got a bone caught in his throat, he started to choke. Ambulance etc. There were no beds free in the hospital so the doctors were trying to keep him breathing in the waiting area until a bed became free and while waiting for the surgeon to arrive. There was a young boy there, I think around 13 or 14, he came up and said "Do you have any spare change?". I thought "OK, I know where that is going to go. Straight into your arm, out the corridor" but nonetheless I gave him what I had, keeping enough for a taxi back if we were lucky enough to make it back that night.   
  
He didn't go outside. He went to the food vending machines. He thought for a long time. Then he bought a packet of sandwiches and a packet of potato chips.   
  
He ate the sandwiches faster than I have ever seen anyone eat before. He was clearly starving. And then more slowly than anyone had ever eaten than I had seen before, he ate chip, after chip, after chip, making them last.   
  
Two social workers came. They said "Jimmy, we are sorry, we have been trying to get you a bed for the last two hours, there are not any, I'm sorry." He said "Please don't send me out there, please don't send me into the night, please, I'm scared, please don't send me throughout." They said "I'm sorry, there is nothing we can do" and they walked out.   
  
I ran after them and I said "He can come with us, come back to the hotel, I will pay whatever it takes". They said "No, it doesn't work like that, it has to be an approved bed and just possibly they were right."   
  
I ran back to my husband just as someone came out to say that the surgeon has arrived and there was a bed for my husband. And the boy, who had no bed, stood there in the doorway cheering for us because my husband had a bed. An I couldn't find him again.   
  
I spent the next two or three weeks crying until my wonderful nephew, who works for the homeless, told me to start being so bloody self-indulgent. Instead of crying about what I couldn't do to focus on what I could do instead. And he said "By the way, if this is any comfort, he is going to make it. If that boy, after all he has been through could stand there in the doorway and cheer for Brian, he is going to make it."   
  
And I realised then what I did want to do. Because many years ago I, too, as a teenager, was homeless. I, too, for a period, was starving. I too, was foraging in dumpsters for whatever food I could find. But, unlike that boy, I had hope. Unlike that boy, I knew that if I could just (inaudible) 12 there were scholarships and if I could get to university my fees and books would be paid, I would get an allowance and a qualification that would pay me the sort of wages that a person got, not a woman. Because back then women in women's jobs did not get enough money to get one.   
  
But more than anything else, I had books. My wonderful extraordinary English teacher brought me in arm-load after arm-load of books. And because of those books I never ever lost faith that life could be good.   
  
I had an email - actually, I had two emails about eight weeks ago. One from a girl saying her best friend was going to email me. She has been through really bad things. Could you please email her back. Then I got the e- flail her.   
  
She said that many times in the previous year she had thought about killing herself. She is 20 years old. But then her librarian showed her she didn't have to. Her librarian gave her books. And reading Australian books with Australian history she said she realised that there were always bad times but you could get through them. She said because of those books she knew she could get through this and she knew that she could make her life good. And when she grows up she wants to be a librarian and a writer and give books to kids like her.   
  
By the way, I do know there is good things happening to her. The last email I had from her the local library, she is now a volunteer there all day Saturday and Sunday. She said they value her so much they even have breakfast ready for me and they give her dinner there as well. She has progressed to cataloguing and she there is from 8am on Saturday all the way to 8pm on Sunday.   
  
She has got a refuge at school and at that library and it came from books. Books matter. Books matter deeply.   
  
Reading is different from watching a video. 10 years ago we would say that intelligent children read books. Now we know it is actually the other way around. Reading creates intelligent children. Using MRI scans we know that when the brain is growing, particularly when it is growing most from 0 to 3 during adolescence, early teenagerhood, the more you read, every time a young persons reads it creates neuron snshgs their brains and new connections between them. If you want intelligent children give them books. If you want kwhirn passion and em pathie who will understand not only their own lives but the lives of the million people they will read in those books, give our children books.   
  
If you want children who have got the courage to create their own futures and Australia's futures and even to say to the stranger next to them "If you have got a problem let's try and sort it out and work it out", give our children books. Because we every book they read they are that person and it is not the same as a YouTube clip.   
Because when you look at something you are only using - you are only looking at it. When you read, when you only have words then you must visualise it all.   
  
When you watch YouTube you can watch someone eat ice-cream. When you read about it you can taste the ice-cream.   
  
Reading is different. It is a richness of not just central experience but intellectual experience. Reading matters. However, one child in five in Australia cannot read to the required benchmark of the Year. 1 in 4 young people in Australia do not meet international bench marks.   
48% of Tasmanian adults in fact cannot read well enough to read the front page of a newspaper. Probably 1 in 11 students you would actually classify as having a learning disability. We are failing them.   
  
Three years ago I went to a prison in Victoria. I was supposed to be there to encourage the men to write to their families. I had been speaking for about 20 minutes when I saw the - you know the male gor I willa pose, legs apart pointing at you, you can always tell the dominant bloke. The wider the legs are apart pointing at you or the other blokes you know they measure Donald Trump knee to knee. Very, very interesting compared to who he is.   
  
Anyway, he said "Look, it is all very well for you. You have published 200 books. I can't read." Every man there, except for one, and I think he was 9, admitted they could not read. As one of them said, "If you can't read you can't even get a job in a supermarket." What other choice did I have.   
  
OK, possibly more than armed robbery but he did have a point. In the last year the number of unskilled positions available in Australia fell by 65%. There have been similar drops in previous years. In other words, within the next few years there are going to be almost no jobs if you do not have skills. But even more than that, even for unskilled jobs you need to fill it forms. You need to fill in safety forms. WorkCover things. You need to be able to read and write.   
  
This is the more or less ignored reality - is that one in five of our young people and at least as many adults, probably more, cannot read well enough, including me.   
  
Do I have a disability? I am dyslexic but what does that mean. I have written over 200 books. As Genevieve said. Yes, I have won awards and those are not books I have dictated to someone, those are books I have written, although admittedly these days I do have someone who corrects my spelling before they go to the editor.   
  
I have a three book a day habit. I read faster than anyone I have ever come across. And yet I cannot fit in my -- fill in my Medibank form. I can't do it. For years, until this year when I finally started to pay someone to do t I just simply didn't claim.   
  
Coming here was one of the most challenging things I have done in the last two months. I don't mean giving this talk. Giving this talk is easy. Getting here. Getting here was difficult. I really didn't sleep much last night because I was actually worried about finding it. Finding a place to park. Actually, finding how to get up here. Finding where the conference is. Even finding the ladies. You probably found that easy but if you actually look at the signs on the door, I notice they had brown on it but the difference between the male and the female is actually not very obvious.   
  
I don't want to tell you how many times I have actually barged into a male toilet, possibly because I have never counted in my sheer embarrassment I have tried to wipe them from my brain. But it is not easy. I get lost.   
  
I can't follow a map. Now, a typographical map, yes, that is fine, because a typographical map is obvious. But I can't tell fleft right because I don't believe it exists.   
  
Look, we live in a circular world. Where is left and right snt it doesn't work. Try explaining that to the dentist the day before yesterday when he said no turning to the right and the left. I couldn't do it.   
  
I will never get lost in the bush because the bush makes sense but a map is never accurate. I cannot follow a map. When you can't tell left from right, even using Google Maps verbally is deeply, deeply stressful. And I realised today, in fact, this is the last time I'm going to try and drive nice a conference in Canberra. For now on I will park outside Canberra. If someone wants me to speak enough they can come and pick me up and drop me back.   
  
I know it sounds funny but I cannot do it any more. I have come to the point of simply saying "I can't face it." I cannot face filling in a form because I don't understand it.   
  
In a building I can't find my way, except in some buildings I can. A hospital. Canberra Hospital, which has just got on the floor different colours to take you into different places. So you just follow the colour on the floor. It is deeply, deeply easy to see.   
  
When I am at a major intersection I cannot tell which side of the road to drive on. Now, this actually is a problem. Luckily it is one that the Roads and Traffic Authority don't recognise. Because if they had any sense they would not have given me a driver's licence. I am deeply not competent to driver in cities. Luckily I don't. As I said, after today this is actually it. And where I do live, it is easy to just get off the froed there is another car coming. There is actually very little traffic. I'm actually a safe driver but I am not a competent one.   
  
But my disability, if it is a disability, is not recognised. It is so easy to put a label on dyslexia but what is dyslexia?   
  
I know the form of dyslexia I have got is shared by others because it is deeply hereditary. There are many people in three generations of our family and we have actually the same problem and we actually share strategies for how we can get through it. Like my brother telling me "Don't be ridiculous, pay somebody to fill in your Medibank forms." But none of it would ever think of counting the change -- none of us would ever think of giving the change we are giving because dyslexia is part of that.   
  
I can't could arithmetic or numbers basically because they go like that. I can read text incredibly quickly like that. I cannot read line by line by line. I learnt to read at 3 so I don't know how I read but I couldn't read "Run Spot run" on the black bored.   
  
I remember my toucher. I had snuck into the library at lunchtime and was actually reading Wlak Beauty frantically turning the pages so I could find out what happened in the entire book in the lunch-time and she discovered me. I can tell remember her standing over me with the head mystery while I was trying to find out what happened to the horse trying to work out how this girl who could not read a single word on the black boerdz could actually be so quickly reading Black Beauty questioning me about it.   
  
That was fine. In fact, I could quote them large chapters with a good memory as well but I still could not focus on a single word on the bored. I still find it almost impossible to focus on single words or a few words.   
  
Captions are impossible. I cannot watch a movie that has got captions. Please, do not think of captions or anything as a panacea for everyone. There is no such thing.   
  
It is so easy to try to get a list of category for dyslexia or for disability. Please, don't try to categorise it too deeply. Because by doing that you exclude people who should be there and counted.   
Jimmy, that I open this had talk with, what disability does he suffer? I don't know. I don't know if he is December election I can. I don't know if there are other disabilities. I do know, however that he is a child who is profoundly deeply in need -- dyslexic.   
  
One of the groups I am patron of is the Yes Scheme for kids on the South Coast with reading problems. When it began they thought it was going to be for mostly indigenous kids. They discovered very quickly most kids in need were not indigenous.   
  
Then they thought it was going to be for kids who had reading problems but very quickly realised that the majority of kids did not have a problem that could be diagnosed. They had simply missed out. The 8-year-old girl who had been to six schools because her parents had just move ed around Australia doing different jobs.   
  
The lovely girl who was - look, you could simply say she was a bit simple. I don't think there is any syndrome you could label her with.   
  
It took longer to teach her to write and read. Her ambition is to be a pre-school assistant and she is going to make it because now she is going to read fluently and above her level. She goes down to the kindergarten and the Year 1 every day. She reads to them and then she teaches them to read using the techniques that she was taught and they follow her in a line like little ducklingss after their mother. They adore her deeply.   
The other boy, one of my favourites, in fact - I know you shouldn't say that - in indigenous, basically had been homeless since he was three years old. Almost certainly due to foetal alcohol syndrome. As he grew more and more isolated he became more and more aggressive. Social Services in their wisdom would only foster him with an indigenous family but there was a shortage of indigenous families and, of course, as he grew more and more aggressive it was less and less likely that any family would have him at the age of 14. He could not read at all but he was lucky enough to get with one of the most superb tutors in the scheme.   
  
Within three months he was reading at the required level. But then he stabbed the headmaster. I mean, he really stabbed him. The headmaster ended up in hospital. But he is a man of enormous compassion. He didn't expel him.   
  
The boy's ambition was to work at Woolworths because of all the food and now he does. He started as a stacker, was promoted to the chicken counter, is now training to be an Assistant Manager. He has been in independent living for the last two years. He has joined the men's shed. He is building a boat. Every Saturday morning he comes to his tutor to bring back the book he has been reading. By the way, they are very sophisticated books. And to get another one. But in reality, of course, the relationship is far more like aunt and nephew. He is going to be fine.   
  
I have never come across a young person or an adult who cannot read and yet over and over and over I keep being told that there are people who can't. OK, one of these included a girl who was paralysed apart from very small movement of her tongue. Using electrodes, using her tongue she can now actually use a screen to actually both speak and read.   
  
She can read and she can talk even if she can only have minimum ute movement of her tongue. She can read.   
  
Those blokes in the prison, some of them again had major problems. One simply could not remember anything that he had seen. That is actually a reasonably common one.   
  
When I look at a car engine, for example, it is a blank. I cannot see it. Or rather, I see it but I have got absolutely no memory of it after a second or two. It is - look, you can see I'm shaking my hands trying to explain what this is like and if you don't share it, it is almost impossible to.   
  
As I said, I don't get lost in the bush. I have got an automatic audetic memory. It is getting worse as I get older. But literally when you open the closet, look in and then when I try and remember there is nothing there even though I know I have seen it and for me this is profoundly strange. It is the same with a form. It is the same with things that I don't even know how to categorise. The things I cannot see and yet I can read.   
  
Everyone can read. With the blokes in the prison I showed them a way that actually works for me that I discovered absolutely accidentally watching the Mickey Mouse Show as a child on TV where you actually had to sing and dance. Mickey Mouse "MIC, KEY, MOUSE."   
  
So we did that in the prison. We got up and we sang and danced the letter that they were going to write to their kids and also pointing out that "Look, if it was your dad what would you rather have. A badly written letter or no letter whatsoever."   
  
So we actually danced it out. We had a room full of blokes dancing out. By the time you have done that nine times you know it. It is kinnetic learning and it works for people who have minds like mine.   
  
There are a million ways to learn. What we need to do is recognise quite how common disability is. Because it is OK for me. As that bloke said, I have written over 200 books. I know I am not stupid but most people who are dyslexic, as I said, we are looking at either one or five or one in 11, most of us will hide or difficulty just as I did until this year. The fact that I have never filled in a Medicare fofrment in fact, I don't actually know if it is Medicare or Medibank because I cannot tell the difference between the two words.   
  
So what does this mean? It means make the world clearer for everyone. Don't assume that there is any one solution. Don't think when you are teaching of using one method. Use many methods. But also, too, never think you understand disability.   
  
I have had a tragic case this year referred to me of a girl who can't see in Tasmania who was given an assistant who kept on saying "Oh, look, no, I really understand what you are going through, dear. My son is death. I really understand." No, she doesn't understand. She has lived and grieved with her son all his life. Yes, she understands possibly her son but she doesn't understand this girl who, in fact, a couple of months ago had actually dropped out and left Tasmania and I deeply, deeply hope at some other place she will get the assistance she so deeply, deeply needs. Because with meeting after meeting after meeting with the counsellors she was promised the technology that we know exists, that we know would help her and she did not get it.   
  
What do we do where we know the technology exists? How can we get for the kids? There are solutions but how are we going to get it? How are we going to make this a priority if we cannot even find a bed for a boy like Jimmy, a 13-year-old who is starving in Australia and does not have a bed to sleep in? How are we going to get the assisted technologies for the kids who do need it? Where you will have meeting after meeting after meeting with the people who are coordinating it but the people on the ground simply will not get around to it.   
  
And when you are 15, 16 and 17, it doesn't take very many weeks before your self-confidence and your hope is destroyed and you become suicidal. And, yes, the back end of last year, they had to top her from killing herself.   
  
How do you do it? I think the answer probably is we need more. We just need more. More focus, more care, more money but also an acknowledgement that the problem is so big that it is terrifying. And it is so big and so terrifying we subconsciously try to minimise it but very carefully getting a list of approved disabilities. And then you have to go through approved methods for showing that you are a member of one of those lists.   
Look, I don't know if I would qualify for that. I'm not even sure probably I would need it. Luckily I have always been stroppy enough and intelligent enough I manage to cope and I cope very well but it is not the same for many people.   
  
One of the worst problems, however, has been the squandering of resources even programs that do not work and that, I think, has been one of the greatest tragedies of all.   
  
With something like Reading Recovery, for example, I have known for a long time Reading Recovery does not work because my son wept through it because a number of my relatives went through it. I knew from anecdotal experience of the number of kids it did not work for. I didn't mean to get into any disabilities. It is simply that once I went public about being dyslexic I would start getting desperate letters from parents and teachers and from the kids themselves to say "Help" and I was more or less sourced into the role and I'm the least capable person in Australia of teaching anyone who read as I don't know how I even read myself.   
  
Snake oil can be recognised but snake oil is a major problem. Because where you have got such great need it is so attempting to think "We have got a steam which is going to reach everyone." Now, until about five years ago we had no way of actually telling what was snake oil and what was not. We simply did not have the data. Now we do have the data.   
  
I would actually recommend everyone, just to begin with with dyslexia and dyspraxia to go to the DSS website. Their publications are free and you will find evaluations in there despite the fact that there is organisations who have threatened them with defamation. That will actually give peer reviews of different programs.   
  
Reading Recovery does not work. Teachers using Reading Recovery, however, can work because the teachers are compassionate, lovely experienced people and they are actually going to nil all of the gaps. So, in fact, often teachers using Reading Recovery can perform miracles but the credit is due to the people who are using it, not the program. It doesn't work.   
  
The hard past is the more millions that you put in to snake oil the more unwilling you are to admit we have waisted the money. I got a tragic email from a father a few months ago. His daughter is brain-damaged. He has put her into a brain training program. It had cost $18,000 for six weeks of this program. What he was basically saying was that it had not worked. What should he do next? But he wasn't saying that. He said "She had gone through it but the results have not happened yet but what do we do next." He wasn't prepared to actually say "I have mortgaged our house and we have got nothing." There has been nothing that has changed for my daughter.   
  
I quote ed a study into that particular program saying that, "Look, sorry, peer review says there is actually no difference for those who go through it" and he was furious. Actually furious. That is when the correspondence finished. He was not prepared to say that even though he had admitted in that first e- flail had been no difference in performance for his daughter, he was not prepared to say sdwoet has not worked, these people fell to snake oil."   
  
So how can you tell snake oil? OK, just like the old snake oil who (inaudible). This bottle of grandma's oil will cure anything. Rub it on your swollen knee. It will cure anything. Can't get pregnant. Yes, it will cure you, madam. Yes, it would have cured the old man too. Just rub it on his what's his name. Snake oil cures everyone.   
  
If you ever see a claim that says "This works for everyone", give it a tick. Snake oil. That works. It never works like that. There is nothing that works for everyone.   
  
Ask any reputable doctor what the statistics for vaccination are. It is never 100%. There is no medication which is 100%. You get pretty close to it but never for everyone.   
  
I was asked about a year ago about the new dyslexia font and again I thought "Snake oil, snake oil" and then one of my books was printed in it and I suddenly realised "Wow, this is easy to read, it is wonderful, it is wonderful." But then I was speaking to someone else who is not dyslexic, she can't read it at all. She said literally she cannot read it. I have spoken to quite a lot of people who never thought of themselves as having a disability at all. They are fine, they are not dyslexic, but they cannot read it. They say when they look at it everything blurs.   
  
So be weary of anything that says it will help everyone. Return rrn the second thing to be very weary of is any scheme where they give you a lot of information about the research. They quote the research of many, many, many incredibly reputable people and when you read those papers they are superb, they are peer reviewed and they say exactly what the proponents of that scheme say. But then when you want the specifics of how they practically apply that research they get very, very cagey. They say it is commercial in competence, et cetera, etc.   
When you ask for peer reviews they may say "Yes, we will send them to you" but they never do. Look for that gap between the initial research, which will be good, but then there is nothing in between with what they are doing and nothing which is peer reviewed.   
  
Be very weary of anything, any scheme where they won't actually give you details of how they do it. Be very, very weary, too, of anything which actually costs more money than you would expect a similar service to cost. Because of all of the schemes like DSS et cetera that I know, they frantically try to run on the smell of an oil rag. They keep salaries incredibly low et cetera so they can help the maximum number of people. They do not work eight hour days or 40 hour weeks etc. They are deeply committed.   
  
Now, I'm not saying they are going to be cheap. Things like the (inaudible) program are going to be expensive because an enormous amount of work goes into evaluating each student at every stage. I'm not saying it is going to be cheap but look and say "Is this cost effective? Is this a reasonable price for what you get?". And where you get a very, very high price, start thinking snake oil.   
  
But the most important thing to look for are just those two words I don't know peer reviewed kwof. Can you substantiate that this works. Not just saying "We have had 3,000 students and it just works." Don't say "Look, I have been using these coloured glasses for the last 10 years and it has worked" because on a Facebook page we are going to find a photograph of you at an event and you are not going to be reading those coloured glasses and you are reading your raising form guide.   
  
Don't provide on anecdotal if you are going to pay money for anything. Whether as a parent or whether as a guide for other people, do not do it un less it can be substantiate ed.   
  
I cannot emphasise these two words enough. Peer reviewed. We want to believe. We want to be that we can help young people. We want to believe that it is going to be easy to do it and it is not easy.   
  
Dyslexia can't be cured. Dyspraxia can't be cured. I will never be able to read a map. I will probably never be able to fill in my Medicare form. I actually have learnt how to spell a little bit better, thanks to my spelling program, but I still can't tell the difference between a word that is spelt correctly and incorrectly because I cannot focus on the letters.   
  
That's never going to change. What will change, however, is that I am fulfilled and I am functioning. That's the important thing. But to get back to the one thing I desperately wanted to tell you today, please do not spend money. Please do not even countenance spending money unless it can be substantiated. Unless it is peer-reviewed. Unless whatever you are paying for can show that it has worked. Not with a handful of people but with control groups comparing a control group and those in this scheme.   
  
It has to be substantiated. Because the industries that we are all in have got so many, many snake oil programs. And, actually, some of them don't even regard themselves as snake oil. Some of them genuinely believe that they can do it. They feel themselves as well.   
  
The one thing I can testify with the experience of so many young people is the worst thing you can do is say "But you have been through the program, everything is solved now." Because that is what makes them suicidal.   
  
For the students in -- for the student in Tasmania, she didn't become suicidal because she couldn't see. She became suicidal because time after time after time she was told that her problems were going to be solved and every time she was told that she believed them because she hoped. And every time they weren't her self-esteem, her feeling "I am not worth it, I am not worth it, I am not worth it. There is no point in my life. There is no point going any further." Every time she was failed that when is she became suicidal.   
  
Sometimes it is better to do nothing than to give false hope, to lie or even to promise resources that you will not be sure will deliver. And what is even worse, put them through a course where you promise it will help and there is no peer review, there is no results.   
  
And as with Reading Recovery, there is a temporary improvement but seven months later they are worse off than they were before. That is a tragedy.   
  
But the triumph for me is seeing across Australia things change. The triumph is actually seeing conferences like today. The triumph is actually seeing the growth of groups and programs across Australia which actually do work. Because five years ago with those emails an those letters I had nothing I could promise parents. All I could say is "Look, cross your fingers, hope this works."   
  
Now we do have evidence. Now we do have peer reviews. Now, not only do we have peer reviews but we actually have evidential methods where schemes and projects can be evaluated. Now at least we have a beginning and now, at least, there is hope. But, also, as I said, and as I have seen in the last eight years, not one single child or adult who has had the luck to come across someone who does know how to help, every single one of them has learnt how to read.   
  
Does anyone have any questions or would anyone actually like to start throwing things at me? Or, for that mar, sue me for defamation.   
  
  
  
QUESTION: It is always absolutely magical to have you there. I think you might have stunned the room into silence. It is entirely possible that people are just thinking sort of - I'm absolutely gobsmacked. I think we will have time for just one question. Yes, down the back there.   
  
QUESTION: Hi. I thought the speech was absolutely wonderful. There was this thing that I kept on thinking through the entire speeches and a lot of policy and a lot of Public Service is this idea that Public Service is a product and that there is a line item that you can use to solve all of these issues and I think this mentality is just denying the fact that people are not products. People's wellness is not a product. And I was wondering what you thought and whether or not a change in discourse around how social work should be approached and whether or not that might be a significantly more beneficial thing.   
  
JACKIE FRENCH: Yes. It is. Look, I agree entirely. I think the first question simply should be "What do you need?" and that's the starting place and even the end place.   
  
Look, hands up anyone in this room who is normal? When he was 12 my son asked me why we couldn't be like a normal family and I asked him to actually name any of his friends who have normal families so he started to name them and I started to tell him "Didn't you know that, et cetera." Actually, by the time he had actually got through 40 or 50 he suddenly realised, yes.   
  
Is anyone here normal? No. We should not think in terms of this. We should think in terms of having large compendiums of resources which might be applicable but there will probably be not one but many different solutions needed.   
  
People are not going to come with one problem. And if they have got one major problem there is probably a whole lot of other ones which have actually become problems because of that.   
  
We need a million solutions but mostly we need the mindset to simply say "What do you need?"   
  
Do you know, some of the things are actually, very, very obvious. Two years ago I did a survey, got over 100,000 responses of what kids wanted to see in education in their school. The most astonishing one for me was, in fact, that most kids wanted longer school hours, not shorter school hours. They actually wanted an average of two hours more school with a choice of what they learnt. One boy suggested every teacher put up their skillset so that those two hours they could spend studying what they need. But the second one - and this came from the most disadvantaged areas and the most advantaged areas - more than 90% of respondents wanted something to eat when they started school, breakfast. That could be because they didn't get breakfast but in the very after fru interest areas, the -- in the very affluent areas in Sydney they said "Look, I have to leave home at 10 past 7 to get to school. By 9 o'clock I'm hurry. Could we just have some crackers or an apple at 9 o'clock."   
I have a feeling that probably this is what kids want. It is not difficult. A few crackers and an apple. We need actually start asking probably everyone how can we help.   
  
Just one final anecdote. My late cousin was the psychiatrist who went to the out-stations in the Northern Ter tree more than two decades ago and he described to me how you find out what is needed in a remote community. But I think what he learned there apply to see every community in Australia. He said "You get off the plane and you find a tree and you sit down and you wait" and the people will come to you and you say "What do I need to do?", "How can I help what you need?". And he said if you wait they will know what they need and they will give you the answers.   
  
So, yes, the mind set simply has to be saying "What do you need?" because most people, whether it is the Jimmies osh the Stephanies, know very well what they need and literacy programs are a heck of a lot cheaper than medium security prisons.   
  
  
SPEAKER: Thank you so much. Always inspirational and thoughtful words from your own personal experience. Thank you for being frank and brave about sharing your own story, too, as you have done often.   
  
Melanie Kovacs is our next guest, cheap executive officer of the Canberra Institute of Technology which is the largest government provider of vocational education and training in Canberra. 22,000 enrolments annually. They provide programs and services across a really wide range of industry disciplines. Leanne's own background in the education and training sectors spans almost 20 years including lots of senior leadership rolls including time spent as detective Director again of ACD education and Director. She is known for her leadership in shaping education and training policy to address skills development at entry level amongist examining workers and to ensure education and training responds to the demand of the industry and community.   
  
Today she will talk to us about sthoecasing the CIT student experience. Please welcome Leanne.   
  
LEANNE COVER: thank you. That is great.   
  
Well, good afternoon everybody. Could I begin by acknowledging that this afternoon we are gathered on the lands of the Nulabor people. I would like that pay my respects to Elders past, present and future.   
  
Absolutely delighted to speak with my staff from CIT, the Canberra Institute of Technology. Quite some months ago about the fact that we were hosting this wonderful conference here in Canberra. So I would also like to welcome you to our wonderful city. I hope someone of you had a chance to look at our facilities over the last day or so and perhaps over the next couple of days.   
  
I know the theme is about embracing the future and I am conscious we are a little bit behind time so I will do our best to help you embrace your immediate future of afternoon tea as soon as possible.   
  
I am going to provide, as Genevieve said, a perspective about vocational education and training and a particular perspective about the Canberra Institute of Technology. In doing so I would also like to acknowledge that your own jurisdictions in states and territories will have a taste just like CIT, who does what I think are wonderful things that only a taste can do.   
  
A little bit about CIT. We are the sole provider of vocational education and training in the ACT. For those who don't know, you may recognise us as TAFE in Canberra.   
The delivery of vocation education and training in the ACT expands some 90 years. So there is quite a rich history and it is my absolute privilege to work in the institute as the CEO with the staff that I have servicing the ACT community.   
  
You may know that the ACT has a very strong reputation about quality education and training outcomes. Yet it is estimated that approximately one third of working people in the ACT do not have a post school qualification and many of those are people with disabilities.   
  
For people with disabilities - sorry, this conference is about improving access to post-second dree education and training. So for people with disabilities, something that we are very committed to at CIT, this is all of our business. Our role as the public provider is to ensure equitable access to education and training for all members of the ACT community and the growing region.   
  
But before I talk a little more about what we do at CIT, I do appreciate that there is no easy answer to what does having a disability mean. The spectrum of disability is as diverse as the community is that we live in and it is as diverse as the community that the CIT serves.   
  
No individual is the same regardless of a diagnosis or otherwise. Most importantly though, everyone has their own dreams and aspirations. An individual is not the some of their disability but is shaped by their values, their beliefs and their lived experiences. And at CIT we work hard on breaking down stereotypes.   
  
And the assumptions that are held by students, their parents and their carers, but also by the teachers to ensure students who choose to study with us get the best possible education experience they can and meet their individual needs, their goals and their aspirations.   
  
We all know that education is the key to suck says in whatever form that may take for you as an individual or for the students that we serve. As the public provider of - I'm going to call it VET, vocational education and training. We use a lot of jargon in our sector but as the public provider for this our goal is to train work-ready graduate. But this may not always be the case particularly for those with a disability or other disadvantaged people.   
  
There are many other benefits associated with VET that may not lead to a job directly but this improves skills, it builds confidence, it improves communication skills and, overall, enhance the one's life students and leads them on a path of engagement and what I think is really important, a path of life-long learning.   
  
This is a real challenge for us in the vocational education training sector as the moern asked the question to Jackie just a moment ago. When the focus is on the line item approach to the budgets, it is a real challenge for us when our sector, the CET sector, is moving to funding only upon completions. When our sector is moving to funding on completion of full qualifications and when our sector is focussed predominantly on meeting the needs of industry and work-ready graduate. Where does the disabilities services fit into those models as we expand access and focus on equity.   
  
CIT is the largest public provider in the ACT and region with over 20,000 students enrolled over year. 1,000 of those students per semester - we have two semesters a year - identifies having one or modify disabilities.   
  
Last year two-thirds of registered students with a disability identified with more than one disability with a notable increase in the complexity of the issues of these students.   
  
For semester 1 this year, the main disability identified by students at CIT was mental illness followed by learning disabilities, medical conditions, vision impairment, hearing impairment, physical and intellectual disability. Catering to the diverse needs of this cohort of students is managed through our dedicated disability support team and I just want to give a shout out to the wonderful staff from CIT who are in the room today and those back at the institute this afternoon for the fantastic work that you do every single day in supporting our students. So thank you.   
  
We have a wild range of supports at CIT. These are in flies assist students with disability to have the best possible experience while they are with us at the institute.   
  
CIT can only offer support to students who are registered with a disability support. So that means they have to identify and register to receive the support that we are able to give them.   
  
So all prospective students with special needs are encouraged to make contact with our education advise I don't remember disability prior to enrolling. If students do not make contact it may be some time before their needs are identified in a classroom making it harder for students to succeed from my perspective.   
  
Early intervention has proven to provide the best outcomes at CIT and increase the likelihood of an enjoyable and successful experience with my institution. Once contact is made with our wonderful education adviceors for disability, they will meet with the student to discuss the individual needs focusing on strengths, focusing on abilities. Their lived experience and the difficulties of the individual. The right program and study load are also considered so that reasonable adjustments can be put in place from the start of the academic journey to ensure success.   
  
Our CIT advisors promote general and specific support options that are available to the students at the start of each term, including individually visiting the students in classes.   
  
Students are encouraged to become more independent as learners but when it is needed they can opt to work with their advisor on a weekly, fortnightly or monthly basis. We try to individualise this as much as we can to asufficient students to stay on track and ultimately succeed for the completion of their course.   
  
I do want to talk a little bit about teachers. We provide ongoing support and training for CIT staff. So training our teachers so they can be the best that they need to be for our students. Which we work to incorporate inclusive teaching practices and universal design concepts aimed at helping the individual be less reliant on specialist services and benefits for all students, including those who have chosen not to disclose, which presents its own challenges for us at the institute.   
  
I do have anecdotal evidence to suggest that students are not disclosing particularly in the areas of mental health and this is a challenge for us particularly as we move more and more to casual or you may know the expression Sessional Teachers. In fact, maybe of our casual or sessional teachers are potentially the employers of the students. So students I have found are a little reluctant to disclose because the teachers are potentially their future employer.   
  
Accessible learning materials are supported with assistance with technology which relies on the format that they are developed in and we have already heard around the international dmps their efforts like Google and app el to enhance their technology to do more for people with disability, meaning that technology is transferrable into everyday life activities.   
  
Here is in the ACT we are also working very closely on the roll-out of the NDIS and supporting the participants in their endeavour for meaningful participation and employment.   
  
In the ACT beyond CIT we have a small number of specific programs for people with an intellectual disability. In Canberra we have two special needs high schools. The Woden Special School and the Black Mountain School. CIT has been working closely with both these schools obvious previous years and is currently running special coursed in you will inre schools at students at the special school giving them a taste of vocational education and training and helping them on a career path.   
  
We have a dedicated campus for trades and vocational education and learning at our campus at Fishwick. Through that college we provide a supported foundations skills training certificate 1 in access to vocational pathways. We have also provided to business reensly for people with intellectual disability through funding through the ACT government. This is aimed at improving the outcomes for job-seekers.   
  
I'm just going to pause there and play you a short snapshot of just the experience interviewing a couple of our teachers and our support staff from our disability area but also just a quick snapshot of one of our students who talks about his experience at CIT as well. So I might get the technical guys or maybe I can do it here.   
  
(Video shown)   
  
  
SPEAKER: I'm Linda, this morning I'm joined by Amy one of our colleagues at CIT. We will talk to you with some of the work we do with students pre-and post enrolment. Let's get started with pre-enrolment. Amy will get start.   
  
AMY: we advice people with disability to contact us before enrolling at CIT so we can help make the right decisions and choices. If the student has previously received any support we would ask for some information regarding that support perhaps in the form of an IOT because it would be our aim to replicate the supports that they had previously had as much as possible (inaudible). That makes the transition between schools and college and CIT much smoother for them and then hopefully there will be more chance of success.   
  
Additionally at pre enrolment we would consider the study roles that are required and whether the students would be best doing a part-time   
  
SPEAKER: As opposed to full-time, online or flexible, they are all different learning option.   
  
SPEAKER: We would look at their preference and ability. We would also take into consideration if there are any medical diagnosis or psychological disorders and we would use that information to form the basis of the support strategy.   
  
SPEAKER: Then post hyphen rollment.   
  
SPEAKER: Post hyphen rollment. Hopefully they can have our service. We put an access plan in place which gives teachers the background on the student they are working with. Information around what they might need with regard to their adjustment, whether that be learning or communication or working in groups or with other people. So hopefully it will help them achieve their path.   
SPEAKER: Or ongoing work with teachers and all staff across the institute is around inclusive teaching practice and universal design concepts. It include reasonable adjustments we recommend, learning materials, assessment design and the concepts behind that had that underpin information getting to students and being understood. The other benefit is the accessibility so students can access learning material and assessment if a variety of formats and platforms and environment. At the end of the day it is not just students we work with and other equity groups within the institute but it is also the benefit to all students.   
  
  
SPEAKER: Hi, I'm Justin Ray. I have got a mild intellectual disability. (Inaudible) is too late for me now. Welcome. I'm a student at CIT. I was born in Broken Hill on 20 September 1973 at 4:20am. I come from a family that are very big educators, very big helpers of people.   
  
SPEAKER: I'm a student here at CIT and I am doing Diploma in Screen and Media. It has been a very long departure for me. Previously I had done CertIII and IV in Screen and Media. That took me seven years part-time to be part of that community and as time has gone on things have developed, like I have got my own professional-grade camera.   
  
I think being at CIT is a really, really great thing. It is very practicable RTO I guess you could say and the teachers are quite inspiration al, especially in the media department.   
  
SPEAKER: If I want to recommend something to anyone about the school I would say that there are a lot of supports here and people are encouraged to really look for those supports. The equity unit is especially a really good one and the person to see there is Belinda Wallace. She is just awesome.   
  
I can't say a negative thing about CIT. They are a good place to be part of.   
  
LEANNE VOVER: thank you.   
  
I particularly wanted to bring the staff and the student experience into the room rather than just hearing from me. I hope that gave you a little bit of a sense about what we do at CIT. But as I said earlier, the same things will be happening at your local TAFE as well.   
  
To finish, I just want to talk a little about the themes particularly about the conference. In terms of change, times have changed and our response to people with disabilities has changed. Our expectations of people with a disability have changed. Our understanding of inclusiveness, access and equity, human rights, ante discrimination and opportunity have broadened and underpin the way we operate our business today.   
  
The expectation of people with disabilities themselves has changed. They want what everyone else is having and why wouldn't they?   
  
We are seeing the success of increased support for students with disabilities in secondary schools, which has raised the expectations lead to go higher numbers of students moving into the VET sector and we are certainly seeing that in the higher number of students with disabilities that are coming into the CIT. At CIT these numbers are increasing with a wide range of high needs particularly with learning disabilities and attention deficit disorder.   
  
  
Return in terms of clal evenings, and I mention one around the direction that VET is currently heading, but a couple of others. Consumers and their advocates are expecting the same level of support in the territory tree sector that they experience in the second dree sector. An increase in the awareness of the rights has also led to an increase in legitimate consumer demand. This does present a challenge for us at CIT. Providing that level of support we do at CIT is resource-intensive.   
  
As the only public provider of VET in the ACT, students with a high level of support needs and conflicts issues tend not to be able to access as many privately registered training organisations. That's because of the unjustifiable hardship principle that may lack - that students may be subject to or that they may lack the entry requirements to go on to university already in Canberra.   
  
There are also increased numbers of students with diagnosed autism spectrum disorder. This cohort of students often don't self-identify at the beginning of their course. I mentioned that earlier about the challenges of non-disclosure.   
  
So this cohort of students often don't self-identify at the beginning of their course which creates a need to provide intensive assistance after issues emerge in the classroom. These students are highly intelligent and capable of success given the appropriate support but intensive study assistance does come at a cost. And a choice.   
  
Students are presented with many choices at CIT. CIT has on offer over 400 courses. These are delivered in a variety of modes that Belinda mentioned on the video. That why we offer support to students prior to enrolling. So we can try to match up the students with the course that suits them best and help inform their choices.   
  
In the VET context the adult learning environment that we advocate for, for the students, and encourage their involvement in the decision-making process, when they previously may not have been actively involved in this space, we work hard to give them this opportunity and to to be really inclusive.   
  
I also want to touch on the choice to disclosure. It is extremely personal. Students are not obligated to disclose their disability as mentioned. This does present challenges in how we actually go about providing those resources that the students need. We have found that a student is more likely to disclose information about their disability or associated needs when they feel they are respected and that there is a purpose and benefit attached to the disclosure. So we work very hard with staff to assist them in that.   
Teachers can encourage students to register with CIT student support where they can negotiate appropriate adjustments. Management regarding disclosures and any support provided by our adviser is done on a daily basis working with students, their family, external support agencies.   
All of this is underpinned by the appropriate legislation with the wishes of the student being paranount any action that we take.   
  
So that's a very quick snapshot about the approach at CIT. I would encourage you, if you are not connected with with a vocational education training sector in your state or territory, to find out more about what your local TAFE can offer.   
  
This year the CIT has undergone some very large changes. We have moved from an advisory council which gave advice to government on our business to a governing bored. And the bored is very clear about our strategic directions for the next four years. They are very clear that we need to raise our ambition to see meet new expectations for all students. Adapting our offerings to provide skills for the future, ensuring all students have access to con temporary learning virpts.   
  
We are trying to work hard to advance Canberraie work force in the public and private sector, increasing work force participation through targeted training, foundation skills and student support services that specifically target students with disability. Drives the connection of graduate to mroirment and further study outcomes.   
  
And we are investing in our business of teaching and learning. We are investing for viability and we are investing for value. This includes new models of delivery that will increase flexibility and access for all our courses for all of our students every day.   
  
At CIT students come first and we are committed to helping every student succeed to achieve their dreams, their aspirations and their goals.   
  
Thank you very much.   
  
  
SPEAKER: Leanne, thank you so much. Please do remember that if you have got some more in-depth questions for some of our speakers, catch them at afternoon teatime as well. Perhaps that's a good point to have a conversation.   
  
Ladies and gentlemen, just to prove to you that the ABC is everywhere, that's where our next speaker comes from too. We are quite proud of him. Very proud of him.   
  
Craig Hamilton started his career as a broadcaster with ABC Radio in 1994. You probably know him for covering rugby league, rugby union, cricket at international level. He is probably best known as I member of the Grandstand rugby league com entry team. He has worked on the past 17 grand final State of Origin series, quite a few Test matches as well.   
But in the year 2000, on the eve of the Sydney Olympic Games where he was assign the to work as a broadcaster, Craig experienced a psychotic episode and was diagnosed with bipolar disorder. He spent 12 days in hospital. Sis his recovery he has become a very high profile speaker on mental health and life still to. His moim yoir is Broken Open. There is a bother coming second book A Better ka Life giving a personal account of living with the disorder.   
  
In sharing his story, Craig hopes that experience offers hope to others. Today he speaks to us about becoming responsible for improving our own mental health. If you like what you hear, he will also have the book available for sale at afternoon tea with a chance to autograph it, Christmas shopping folks.   
  
Craig, welcome.   
  
Return ooi   
  
CRAIG HAMILTON: Good afternoon. Hello. It is great to be here this afternoon. Genevieve, after that introduction, even I can't wait to hear what I'm going to say.   
  
It is lovely to be here. I'm amased by Jackie's story that she has published 200 books. I have published 198 less books than Jackie but that's OK. I'm also amased that she reads three a day. Did she say she reads three a day. I'm going to give her one of mine and I want it back by afternoon tea after she has read it.   
  
My topic today is becoming responsible for our own mental health. Now, that is easier said than done. That's not a throw-away line and I know that very well. Because when you are in the grip of mental illness and you are seriously un well, then you cannot be responsible for your own mental health. You need help. You need someone to assist you, whether that is a family member, whether that is a carer, whether that is a doctor, a psychiatrist, whether it is in a psychiatric hospital.   
  
I have been in all those situations. I have experienced clinical depression where I was suicidal 16 years ago. I have experienced mania. I have experienced psychosis. I have been diagnose ed with buy.lar disorder 1, 16 years ago. And I was hospitalised for 12 days on the eve of the Sydney Olympics. I was supposed to work there. I didn't make it.   
  
There is a myth, I suppose, an untruth, a myth that I have been well since then. Because I have written a book and I do a lot of speaking.   
  
I haven't been well all that time. 95% of the time I am but I have been hospitalised on four other occasions, every time with mania and on a couple of occasions with psychosis again.   
  
And what follows that, if anyone knows the pattern of the roller-coaster of bipolar disorder, what follows the high is depression once again. So it has been challenging. It has been challenging for everyone in my circle. It has been very challenging for me and my family. It has been very challenging with work trying to stay at work, work through things, but I have got a very supportive employer and I know I'm pleased and I'm fortunate because many Australians, most Australians do not have the support level that I have had. And that is why I do what I do today.   
  
Because I hope to make a difference. Look, the important things, we hear a lot about the reducing stigma. And I'm big on that. It has been one of the things I have try dude in the last decade is reduce stigma around mental illness. It serves no purpose. In fact, it makes things worse because those who are in the grip of a mental illness feel like they are fighting the battle with one arm tied behind their backs.   
  
It serves no purpose. I'm long past feeling embarrassed about having a diagnosed mental illness. Long past that. I don't care. I understand that people will think what they think. I have got no control over that so why would I give one ounce of oxygen. What is important to me when I put my head on the pillow at night is that I am OK with me, and I am.   
  
So Sigma reduction is right up there. Education and awareness is right up there too and I have try dude that in the role as an advocate and as a speaker -- stigma. But the other thing is, and the topic today, becoming responsible for improving our own mental health. I said you can't do it when you are seriously un well. Return wlaurn I have tried to do, and I have been conscious about doing in the last 10 years, is when I am not seriously unwell, when my mood is stable, when I am OK and I am functioning back at a good productive level, that I have made some changes that were necessary.   
  
I have recognised I needed to make some changes to enhance my health and that I think is a lesson for all of us and it is something we should concentrate on, whether we have the mental illness, a disability of any kind. On what we can do. We may not have control over our disability. What we do have control over is how much we sleep or how much importance we put on our sleep, what we eat, what exercise we can get, what techniques we use to minimise our stress. Do we do yoga? Do we sit on the beach snlt which is difficult in Canberra, I acknowledge. But maybe by the banks of Lake Burley Griffin. I don't know. Walk the dog or kick a ball if you can. Get out of your head for a while. That's been one of the things which has been hard for me to do. But I have learnt how to do it. I have actually done some yoga, actually learnt how to meditate.   
  
My mind at times has been so busy and so frinetic and so manic that learning how to meditate was impossible but it has been really important to me. It has been a tool that I have used to slow down. To slow down, to take some time.   
  
Because I am literally like, I can be like a wired up lab rat at times and I have been like that and that is not good for anybody, least of all me. So learning how to slow down creates some space and some time to do things that are proactive in terms of good mental health.   
  
I have what I call the Craig Stay Well Plan. I haven't patented it. You can use it. It is no charge. I will give it to you today. These are the things I do. I have ovenl said I am not a mental health expert. I do not speak her. I am not here today to claim that I am a mental health expert. I'm not. But what I am, I'm an expert on my own experience. I'm an expert on my own story and no-one knows my experience or my story better than I do. So I can share that. And if there is some value in that then that is great.   
  
Like the anecdote I gave you a moment ago about how I'm over stigma, it doesn't bother me. I'm also OK if you walk out today and go "That guy hasn't got a clue, what a crappy presentation." I will go home and sleep OK. So think that if you wish.   
  
The port things for me, I have had to prioritise these things, I had to think about these things. Jackie talked about reading. I agree with her 100%. I had to reinvent myself. I had to educate myself after what happened in 2000 because the year 2000 and that acute clinical depression - you get to a point where you are suicidal and you look at your life and you think "I have nothing to be depressed about." I have got a job. I have got a great family. I have great friends. I don't have any money worries. Then why would I be depressed.   
  
It actually makes it harder because you wake up the next day and you beat yourself up big-time because you think "Well, there is a lot of people in the world that have got a very good reason to be depressed about their lot in life and I don't consider myself one of those so why do I feel like this? Skwepd. It is not until you read about, you educate yourself an you find out about depression and you find out about bipolar disorder and you realise it is very common. A lot of people experience depression. A lot of people experience bipolar disorder. Not as many admittedly have experienced clinical depression but, nevertheless, these things are not - we are not talking about a small group of people in Australia.   
  
I'm only going to ask you one question today. Put up your hand if you know someone or you have worked with someone or a member of your family or you have at some stage experienced dprigs? What is the big deal? What is the big deal in talking about this stuff? Why has there been a reluctance for so long to put this on the table? At bemuses me. But I went through that phase.   
  
I didn't come out of a psychiatric open in 2000 saying "Gee, I'm happy to talk about this now. I think I will write a couple of books and go on a speaking circuit." I was embarrassed for three years. I didn't really want anyone to know what my experience was like for three years.   
  
I had the doctor, who initially prescribed me anti-depressant medication and gave me some time off work. I said "Don't write depression on the doctor's certificate, write "Viral illness" because I don't want anyone at work to know." So I went through that. I experienced that, that embarrassment, that shame, that humiliation that is ingrained still in many parts of Australia that if you have a mental illness then you are less than worthy, incapable, you would be bridge on-holed, you won't be dieblt your job. Your prospects of recovery are poor. What value to society will you be.   
  
All of these labels, whereas employers need to know. How many employers are in the room? Not many. A few. Employers need to know that your best employee may be sitting at a desk an you have no idea they have a mental illness. They have not declared to you they have a mental illness and they may well be your best employer, the most productive person in the room. But not comfortable enough to disclose.   
  
I know the challenge with that and I make no judgment on anybody whoness that situation. But I want us to get to the stage where we can all just have a different view. It literally is a consciousness shift. We need to get from here to there. And so discusses and open transparent debates are necessary and whenever I'm able to I will continue to be part of that discussion and hopefully driving that discussion.   
  
Sometimes I get sick of the sound of my own voice but not very often. It doesn't happen very often. Which is one of the good things about being on radio, Genevieve, isn't it? You can get up on the morning and turn that microphone on and say "Gee, I'm sounding good today."   
  
  
But I have learnt a lot through this process. You learn who your friends are and I'm sure I haven't had a negative experience personally. No-one has ever come up to me and said "You are that guy that wrote the books" or "You are the guy who was in hospital", "You are the guy with bipolar disorder." Not one. I'm sure it has been said. I'm sure there have been people walk away, drift away and that's OK, too. Everyone has got a choice. I'm fine with that. The people who are important to me and you know your friends, they are still there. Every single one of them.   
  
  
I mentioned the eight points. Sleep. Hugely under-rated. I used to think I could get by with six hours a night. When I was manic I would survive on three and I would get up the next day and I would be still running on high. But that's a sign for me now that I am running on high. A big sign. If I don't sleep well the warning bells start running. So sleep is important.   
  
For me, I should have put it at the top of the list. Medication. It took me a long time to accept that I needed to take medication all the time for this illness. It is the same as a diabetic who has diabetes and they stop their insulin. What happens in they get sick. No different for someone with bipolar disorder. So medication, good sleep, exercise, good food, diet, also hugely under-rated. Hugely under-rated.   
  
There are plenty of places you can go and eat rubbish. Poor nutrition, nutrition poor. If we are really serious about maintaining and improving good health, eat well. Eat well. The investment is worth it.   
  
I like to take a vitamin B every day. I think particularly for a mental illness, for depression or for bipolar, vitamin B, we chew it up so we need my view to supplement that. That helps with my health, anyway.   
I mentioned exercise for stress management, yoga, meditation. Now, they are tools. I don't do it every day but I can take it wherever I go. If I'm travelling, you can meditate as long as you know how to do that. You can learn how to do it. There are CDs and DVDs to teach you how to or to guide you through a meditation and if you can yoga is brilliant. It gets you back into your body and stretches what needs to be stretched.   
  
So we have covered those. We have covered diet. We have covered sleep. We have covered medication. Exercise, yoga. We are getting there.   
  
I will come back to them but they are the key ones.   
  
So I do those things. I have got to stick to that. I have got to stick to that. I have got to be able to walk the walk as well as talk the talk. There is no good me walking out here and completely disregarding what I have said.   
  
The other one, that's the one, alcohol. It was one of my close colleagues for a long time. We had an interesting relationship, alcohol and I, in respect of that I was not a day-to-day drinking of alcohol. In fact, I would go weeks and I would not touch a drink. But I was the type of person that if I had a drink I would not go home. I did not have an off button with alcohol and it did a disservice to my health and it certainly did a disservice to my mental health because, even though I was having the time of my life when I was having a drink, the down side was that would worsen the mood the next day. Because alcohol is a depressant.   
  
So I sort of basically said goodbye to alcohol entirely about five years ago. And guess what? I feel better for that. I feel better for that.   
  
I know we are tight for time so I do want to - have we got five? We have got five. Thank you. Thank you Genevieve. I have got to talk up to the top of the clock. Up to the news.   
  
I want to tell you a couple of things that have inspired me to be public and inspired me to keep going. Writing a book about your experience - you have only just got a snapshot. I haven't really described today what clinical depression is like, nor what suicidal thoughts are like, nor what mania is like, nor what psychosis is like. Because it is not the brief. The brief is becoming responsible for improving our own mental health.   
  
Depression overwhelmed me completely. I couldn't get out of bed. Suicidal thoughts were real. They were not a part of my imagination and they just floated in from some place in and out of space when I was in that state. The depression was so great I didn't think it would lift.   
  
Mania for a period of time is like a fantastic little ride. It is like going to Luna Park with the gates open and they say you can go on every flied here and you won't have to pay. That's what mania is like. But, of course, the down side of that is you will crash and psychosis is badly madness. Psychosis is basically losing your grip on reality and you have all sorts of thoughts, raising thoughts, impracticable and improbable and quite amazing thoughts that you didn't think were possible and when you come down from psychosis and you are medicated to bring you back down you go "How could I have thought that." So it is a real mystery, psychosis.   
  
So why would I want to write about that stuff? Why would I want to nought out for public consumption with three children in school, as they were at the time? My son was nine, my middle daughter was seven and the youngest was three. So I'm going "Why would you do this?". They are going to go to school, their parents are going to read these books or the book at the time, there was one. And it was a tough decision. We had a lot of meetings as a family because I had an approach to write a book and I initially said "No, I'm not putting this out." But we had a number of family meetings and we got to a point where we thought the greater good must prevail and the greater good was to tell the story, to share the story.   
  
Craig Hamilton was not the only one who had experienced these things in Australia or anywhere else. There were plenty of people. So they needed some - they needed a story. I think they needed a story.   
  
To get it over the line I read a quote which tipped the balance in favour of publishing a book. Martin Luthur dming 1968. He said a lot of wise things but the best I think he said, a thing that stuck in my consciousness, was "Our lives begin to end when we remain silent about things that matter." I read that again. I saw that in the book. I said "Our lives begin to end when we remain silent about things that matter." I thought "He is right.". I said "Put that into your own lives." I thought if I don't write this book, if I keep quiet on this book and this story my life will begin to end because this is important.   
  
I thought I might live to be 105 but my life won't be what it could be. So we did it. Return rrn the other story which I'm going to tell in about 90 seconds is - and probably this story hits home with me every time, when I first started speaking we organised - there were a number of people who organised a forum in Newcastle, my home town, and it was a depression awareness night. It was a mental health awareness night. And we wanted to get as many people to come along. It was a free event. So when you work for the ABC and you want to tell people that you have an event on you go and get interviewed on your own radio station. It is very helpful.   
  
So I went on and I told my story as I have told it today in a condense ed version. I said I want team come along. This is what depression is like, this is what I experienced. While I was speaking a fellow rang up. A fellow rang the station. The producer took the call and this fellow didn't give his name. He said "He is talking about me." He said "That's my experience." He said "I have had depression on and off for three or four years. I have been suicidal four or five times. My wife doesn't know. My kids don't know. I have never been to the doctor. My friends don't know.".   
  
The producer who took the call said "Hang on, when Craig comes off he will have a quick word to you" and this fellow just said "I can't do it, it is too hard. I can't talk about it" and hung up.   
  
So the producer came in to see me when I'm off. She is very upset about the call. I said "Look, I have heard plenty of war stories. I said that's another one. That's what you are fighting. People who can't or don't have the wherewithal or not courage but they don't have the capacity at the time to tell anybody."   
  
So we went to the forum the next night. 150 turned up, which I thought was pretty good for a depression forum. At the end of the event I was standing down the front of the stage and a girl who was about not more than 16 walked towards the front of the stage and she was very upset and she had been crying and carriageway see she had been crying and I said "You have done it tough here tonight." I said "Have I pushed your buttons? . Have you got depression at the moment? Are you struggling?" and she said "No, I'm fine." She said "I just came to say thank you because the man who rang your radio station yesterday was my father." And as soon as he got off the phone he told mum that he had depression, he told us kids that he had depression. We got him into the doctor.   
  
I have never met him. I have never seen his daughter since. I can only trust that he did get some help and he is OK. That's why I do what I do.   
  
So when I get tired, raggedy and sick of my own voice I think about that day. It gives me a bit of a spurt. Thank you very much for listening.   
  
SPEAKER: Thank you so much Craig. Again, thank you for being frank and kraj boss your own personal story, which gives us all so much to think about. We are running a little tight for time. So what I'm going to suggest is that we have afternoon tea now. It is about 21 minutes past 3. And maybe we spend about 20 minutes out there. That will load into our program nicely.   
  
While you are out there, take note of the exhibition tables. I will tell you more about that when we come back. Also the silent auction going on in the foyer. Go to that because you are doing good in your own cause.   
  
GENEVIEVE JACOBS:   
Ladies and gentlemen, I just ask you to gather together again please. Take your seats. Let's get through this last chunky session and then there is a drink in it for everyone.   
  
A couple of things I wanted to draw your attention to. We have been talking about some fabulous people. You might have noticed (inaudible) who focus the area of education on youth mental health and they have programs that train people to speak about their experience with mental ill health.   
  
(unknown term), they are also on the current speaker program. They have developed technologies that enhances learning and productivity. You will also find (unknown term) to help people with disability to prepare for, find and maintain meaningful employment. They also provide education training and services under the NDIS. They are the first to achieve confident recruiting status.   
  
But begin the final concession for this afternoon which come from Sue Trinidad and Ian Cunninghame from Curtin University. Professor Sue Trinidad is the NCSEHE Director. Prior to becoming the director, she was Deputy Pro Vice Chancellor and Dean of Teaching and Learning. She is establishedan established scholar and researcher in the area of higher education and currently leads the NCSEHE team and various research projects.   
  
Ian Cunninghame has a masters degree with professional writing and publishing and bachelors in internet communication. He is currently assisting the NCSEHE with 2014 2015 funding round report gathering research relating to social mobility in relation to higher education and cataloguing past and present research.   
  
All very useful and quite dense information. I think you will find there is a particularly fascinating presentation. They will be too up-to-date about 'Emerging Challenges for Students with Disability Participating in Higher Education: A Review of Six NCSEHE Funded Research Reports'. Welcome, Ian and Sue.   
  
(Applause)   
  
PROF SUE TRINIDAD:   
And onto the next one. Thank you very much, everyone, for the invitation to come here and talk to you about the review of the National Centre's Funded Research Reports, and we are specifically looking at those in the areas of students with disabilities.   
  
On your tables, you will find those six reports that have been collated. Now, we didn't expect quite so many people still here at the end of the day, this is all online and I'm sure there will be a few copies left on some of the tables because some people may or may not take those. But that is the publication so that you have it all there in a hard copy.   
  
We have had a wonderful day here. We are only here today and off to Melbourne tomorrow. Before I go any further and I am really looking forward to that cake, I want to thank our wonderful ladies here because haven't they done a wonderful job? I'm just looking at how exhausting it is. I just wanted to thank them. What a wonderful, wonderful job.   
  
(Applause)   
  
And it is always a pleasure to be at these conferences because we were at the Perth one for those people who came two years ago. By golly, the years go by very quickly. What we have been able to do through the National Centre is look at some of the aspects of student Equity in higher education in Australia.   
  
We are trying to contribute to the shaping of future directions. So we want to share with you some of the research that informs the policy and practice and through this meta-analysis where we have been able to bring six critical reports together, this will provide greater clarity on the trends and issues that will drive equity in higher education today.   
  
And we all understand the important role of higher education, I do know that of the people here from TAFE, as well. It is very interesting. I have been talking to a number of colleagues today about how that pathway is being developed here, particularly in New South Wales, which is also very important.   
  
Our research is specifically looking at universities and university students in being able to provide the opportunity and access and support for those students as they go into higher education. And I want to thank, there are a number of researchers who have participated to the work you will see collated. I am speaking today and tomorrow. I thank those people. And Ian will talk through those people in a moment.   
  
I also wanted to thank the ATEND group and Darlene because what a wonderful collaboration we have shared over the last two years. We have been part of the webinars, which have been an absolute pleasure, coming online with a large number of people and being able to present some of this research and also to support the researchers who are doing that. It has been a wonderful collaboration and thank you to ATEND.   
  
Our purpose, as we are funded via the Federal government, as David Fintan said this morning, is specifically looking at trying to close that loop between Equity, policy, research and practice. We have been hosted at Curtin at the last three years and produced a lot of work inin all of this work is accessible through our website. So we call it 'neshy' if you sound it out but it's NCSEHE.edu.au. You are welcome to have a look at some of the work there if you have not already.   
  
We also have eNews. Some of the things on there have of course been promoting this conference and the many wonderful conferences we have across Australia, but also national and international research helping people look at some of the great stuff that is happening at the moment.   
  
We also have our tweets and that is Louisa in the blue next to Darlene. You will be pleased to know that one very important tweet one out this morning and picked up by Qantas. Qantas will now look at improving its captioning of movies. Go social media and well done, Louisa. That's the power of social media.   
  
We also have produced a number of publications, over 70 case studies, and the partnerships in higher education one is particularly important. These are all available, we can post them out to you if you want a hard copy or alternatively to download from the website.   
  
The partnerships in higher education talks about a lot of the wonderful community partnerships that are happening within our universities and many of those partnerships are with the TAFE and the other organisations within communities, and it is just so heartening to look at the 70 case studies and to really feel honoured that we're working with such a wonderful group of people who all work together for a common cause.   
  
We have also funded to date 24 research projects and another 10 for this year. This is where that research has come from. What is so important about those on what the department is very appreciative of, and saying the money is being well spent, is it is written in layman's terms. So politicians, and everyone can understand that research. We are really trying to translate that research into practice and policy.   
  
And of course, if you come into our website, there is lots of information there within the disability area as well as other areas.   
  
So, what we have done is collated the 24 research projects, and this has been Ian's job, under each of the categories that we have been looking at. So we funded one in scholarships, collated or did the meta-analysis. There has been one in Indigenous issues within graduate outcomes, and low SES and first in family, and the one we are going to talk to today is the issues and trends for students with disabilities.   
  
So there has been a lot of work done, particularly over the last two years in the research area and we're leaving you with that publication at the website. I will now handover to Ian to talk through.   
  
IAN CUNNINGHAME:   
My name is Ian Cunninghame, a research assistant at the National Centre. It bit nerve racking following all the inspirational Keynotes we have had today. I might be a little bit dry by comparison, but I promise I have an anecdote somewhere in here to lighten things up a little bit.   
  
As Sue mentioned, the centre has been developing a series of reviews based on the research projects completed under the student equity and higher education research grants program. This will detail the review conducted on the research projects through the 2014 and 2015 funding rounds which focused on students with disability.   
  
Through the course of the review, we identified a number of points detailing emerging challenges for students with disability in higher education. I will be looking at each project we reviewed and outlined in a few of the common finding which were present throughout many of the reports.   
  
Following this, we developed a series of recommendations based on the areas covered in this report in order to identify future research directions can be taken in this field.   
  
PROF SUE TRINIDAD:   
We also have to acknowledge Matt Brett and Trevor Allen's work because they were able to peer review this work and make sure the meta-analysis was done correctly.   
  
IAN CUNNINGHAME:   
So the first report we looked at was exploring retention and success, students with disabilities from Susan Johns, Darlene McLennan, Kerry Fisher at the University of Tasmania. They set out to explore the retention and success rates throughout these universities.   
  
They took a look at (inaudible) to know retention and success rates. Semistructured interviews were conducted at universities with varied overall performance of students with disabilities. Three each with high-performance, medium, inconsistent and low performance to gauge the extent to which each took for different supports.   
  
To supplement these, an audit of University disability on the policy and culture concerned with student numbers. What they found was that student numbers varied widely. There were a few common elements that the students shared.   
  
From all the universities, typically in regional areas with between 10 to 20,000 students in total had higher percentages of students with disabilities. The share of each broad disability classification remained relatively stable across the data collection period. More stability was also seen when assessing the retention and success rates of students with disabilities across the time period with rates remaining constant, yet lower than the total student rates.   
  
University groupings have showed significant variations in retention rates with GO8 and ATN showing significantly lower rates than the other groupings.   
  
As for findings on support offerings, information on service accessibility, the research found attitudes were varied again. The website audit found information was often lacking due to websites being cumbersome to navigate.   
  
The identify Disability Action Plan didn't always have the support of staff due to lack of knowledge of policy.   
  
Many interviewees saw the DAPs has, "Not playing a role in the way the university has developed its processes." This lack of awareness was seen as a staff training issue, especially for casual academic staff, where only one university had any disability awareness training made mandatory for casual staff.   
  
It was not all bad news. Along with a willingness to facilitate better training for staff among institutions, many indicated a conceptual shift away from a medical model of disability towards an inclusivity model of disability support by placing disability support under student support divisions, rather than under health services.   
  
The second report that we included in the review was Best Practice in Supporting Indigenous Students with Disability In Higher Education by Michelle Fleming, who you will hear from tomorrow in another keynote, and Diana Grace at the University of Canberra.   
  
The project had three core methods and an extensive literature review examining disability services in higher education, specifically disability support for Aboriginal and Torres Strait Islander people, and disability support available for indigenous students at Australian universities.   
  
These are detailed enrolment figures for students with disability, and then a survey was designed to gauge levels of support amongst these units at university. The report acknowledged upfront that Aboriginal and Torres Strait Islander people had been over researched and under consulted.   
  
Later they speculated this may be why only two survey responses from IEUs, Indigenous Education Units, nation wide were received. Through the literature review, it was found students with disability are more likely to rely on informal or external reports than they are to access and utilise University services.   
  
It is also suggested that this is especially the case for indigenous students with disability, who may not see the services at the University as responsive to their issues and experience. As with many of the students with disability, indigenous students with disability often find themselves in the precarious position of having to demonstrate their capability to study, while also having to prove limitation in order to access necessary support.   
  
And such disadvantages are amplified by experience in multiple equity identity status.   
  
As for the enrolment data consulted, the research found along with growth in the proportion of indigenous students at university, just indigenous students in general, sorry, indigenous students with disability are growing share of that indigenous cohort, making support for these students a key priority.   
  
As previously mentioned, the survey results from IEUs was lacking so it was not able to be included in the report. The results from disability units themselves were plenty. 17 institutions responded with one from each state and various university groupings, and a mix of urban and regional institutions so plenty of room for comparison.   
  
They found less than half the Disability Unit surveys selected specific information of indigenous status on registration. This directly impact the next key finding, that support for indigent students was uncommon and often in the form of referral to the university's IEU.   
  
Collecting information on indigenous status as they came in, the potential to do that was diminished. Despite this, coordination with IEUs was reportedly common but not in the frequency of coordination between the two. With only complex cases having a coordinated approach between Disability Unit and IEUs.   
  
The next report we consulted was supporting students with autism is a disorder in higher education. Dermot McCann, Christa Reyna, Carol Devereux, Fiona Sheehan and Lindsay Quarmby at University of Tasmania again.   
  
This project reviewed published literature international and national on ASD students in higher education and how they interact with the built environment as well. This was followed by cross-sectional analysis of the support available at universities by surveys of practitioners and supplemented with in-depth analysis of student experience through an interesting visual-based research, which I will come to in a moment.   
  
First, the literature and practitioner surveys raised a number of points of interest. There is a need for more comprehensive integrated support for students with ASD as peer mentor and transition supports prove successful, but they could benefit from integration with nonacademic skill development programs. More awareness is also needed a amongst staff and students, particularly for students with ASD, on the complexity of those on the spectrum and the perceptions of capability. Because the perceptions of capability and disability are generally far narrower than the reality of student experience.   
  
Also there is more room for emphasis on supports, which promote students with ASD exercising agency through facilitating self-management where appropriate. As we have heard earlier today, there is a fine line between providing in support and restricting someone's capability.   
  
As mentioned before, the research undertook a visual analysis of the built environment and the findings were unique and informative as the impact of the built environment is often underestimated for students with ASD.   
  
The tension between forced interaction and social isolation was notable as centralised university resources and services could provide sensory overload. But the risk of social isolation associated with having quiet zones or safe spaces far away from the centre of campus could be just as concerning.   
  
In a similar way, teaching methods which make use of learning spaces in dynamic and collaborative ways could be highly effective for some students but can be overstimulating for those with ASD, again providing another barrier to their learning.   
  
Navigation of campuses was highlighted as a potential overlooked issue, with the legibility of science and the logical flow of campus and learning environments, which could cause excessive confusion for those who might be strictly logical thinkers. And here's the anecdote: as an example of this, when I was an undergraduate humanities student, I had a little bit of confusion as to where my classes were. Engineering students might have all their classes in the engineering building, business students would be in the CBS. But I had classes in architecture building, commerce, health sciences, engineering, and education building so I can understand how it would be difficult to figure that out.   
  
The next report we looked at was the role of inherent requirement statements in Australian universities by Matt Brett, who is also here today. Andrew Harvey, Andrew Funston, Rachael Spicer and Adam Ward at La Trobe University.   
  
The project set out to outline the broad legislative demographic and policy context for IRSs through an analysis of Australian and international – they drew dominantly on literature from the US – policies. To supplement their investigation, they supplemented and audit of the policies that are currently in place at Australian universities.   
  
Given the relatively underresearched nature of IRS, the lack of information was highlighted in the report and it was noted that the lack of literature to provide guidance on the application of reasonable adjustment was also an issue for understanding the applications of having IRS in place.   
  
Often the concern with reasonable adjustments were to do with academic standards and requirements. The Disability Standards for Education were noted as providing guidance on how and when adjustments may or may not be seen as reasonable, however, it's important to note IRSs were not only formed with the board disability in mind as there are a variety of groups that have specific details on what is required for successful participation in a university course.   
  
As to the specific issues for IRS in place already, consistency was a major concern. The approach to developing and communicating IRS to prospective students, there is the need for that to be standardised to reduce confusion for applicants and ensure that universities are able to clearly articulate what is required of those who might be looking to undertake a course of study.   
  
And the researchers identified this could be assisted by developing evidence-based guidelines and/or frameworks for universities to base their IRS on. Also to allay concerns regarding exclusionary language and reference to or impressions of exclusionary practices when articulating the IRS.   
  
The next study was the only one included from the 2014 round, because when we were looking at research projects to approve for the 2015 round, we identified there was a lack of research in the students with disability area so we decided to make that the focus. The rest of the five reports we looked at were from the 2015 round. There were a few others that had a bit of focus on students with disability as well.   
  
This study is titled Resilience/Driving in Post Secondary Students with Disability from Charlotte Brownlow, Jan DuPreez and (inaudible) at the University of Southern Queensland.   
  
It was mainly two phases, online surveys looking at student demographic experience and performance. Following this, they had in-depth interviews with purposely selected thriving students.   
  
One of the core findings of this study was the students with a GPA of greater than 5.5 exhibited higher levels of resilience and academic satisfaction. Also, they found those who indicated academic success were more likely to be strategic and self-motivated learners, seeking out appropriate service where needed and relying on their own capability where possible.   
  
However, despite these two findings, there was not a direct link that could be drawn between resilience and specific indicators of academic achievement.   
  
Besides resilience, there were other interesting findings in how students with disability who were thriving approached their studies and how they perceived barriers to successful. Those interviewed said they were more likely to a tribute barriers to external factors rather than individual characteristics, which can subsequently indicate greater resilience through not laying blame for disadvantage on themselves.   
  
Most alarmingly, however, despite the interviewees indicating relative success so far, there were cases identified were teaching staff refused to the allowance of reasonable adjustments due to their own perceptions of a reduction in academic integrity or providing an unfair advantage to the students.   
  
This clearly adds further emphasis to earlier points about the need for more disability awareness training so that staff are more than aware of the need for these services.   
  
Overall, the authors found students could display success when the disabilities were less present in the course of education. As such, they suggested support be provided with the notion of first enabling the environment and then enabling the student.   
  
The final report we included in the review was the only one to focus solely on students with disability in online higher education. Accessing Barriers to Online Education for People with Disability by Mike Kent at Curtin University, took a detailed look at students with disability studying through Open Universities Australia.   
  
The research took a detailed look at the accessibility of online learning for students with disability and their approach to disclosure through 366 responses to a survey distributed to their students.   
  
The surveys included an invitation to volunteer for follow-up interviews, which attracted more than 60% of respondents to volunteer, which was 226 students in total. It was 143 that ended up being able to take part in interviews later on to form this report so there is plenty of evidence to go on with this one.   
  
The study found students with disability, due to online study as the preferred means of access of higher education – this may seem obvious because they are all online students – but some indicated they found the mainstream university system was purely inaccessible.   
  
  
That's basically why they set the online University was the preferred means.   
  
The categories indicated by survey respondents detailed some unexpectedly high instances of students with mental illness at 44.9% and medical impairments at 39.2%. But he noted that this is largely due to actual numbers of students with mental illness being hidden behind official data collection classification.   
  
There were comparatively low portion of responses from those with hearing and visual impairments as well as intellectual disability, however they responded at a greater rate. This response is combined with official OUA figures combined with disability showed that there need to be better supports provided online.   
  
A few issues specifically related to OUA's model related to higher education were also identified. Many students indicated an administrative procedures and restrictions around disclosure were unnecessarily prohibited, given that students had to go through the process at every institution. They would prefer OUA to disclose that information to the next institution they study.   
  
Universal design principles appear to be lacking in the online higher education, even through OUA, with many courses simply attempting to mirror on-campus courses, rather than trying to take advantage of the online nature. Additionally, the response noted the continuous OUA study cycle can present greater inflexibility with those with intermittent yet severe conditions which might interrupt their studies at certain points.   
  
Before we move on to the recommendations, we have just got a few groupings of common findings which came from all six of the reports. First in terms of the cohort details, it is clear that official disability classifications really do need revision in interest of more accurate data collection, and being able to actually identify some of the issues captured especially under the category of 'other'. A few that fell under this category could be mental illness or acquired brain injury. Each of those classifications carry quite different needs.   
  
Another crucial finding is that the overall percentage of enrolled students with disability is rising, but with small universities showing greater gains. Unfortunately, though more students with disability have the opportunity to study, their labour market outcomes are still poor in relation to the overall student cohort.   
  
As for the support and experience of students with disability, a critical finding was students who seek support tend to exhibit greater retention and success rates, which is an important factor to keep in mind considering how important it is that students are aware of the existence of support services to begin with.   
  
And considering measures to address stigma, paticularly with mental illness, to ensure that disclosure is encouraged. Which leads to the next point, the disability awareness training is seriously needed in some cases and should be implemented at all levels of university structures. This includes not just the academic staff, but administrative staff as well.   
  
Finally, universal design principles need to be revisited and applied across all courses, especially those taught online.   
  
So now to the recommendations that we gathered. From reviewing the details contained in these reports and also some of the specific recommendations that were advised by the researchers themselves. The first one we came to was disability related data collection and performance indicators should be refined to gain a better understanding of participation of students with disabilities in higher education.   
  
Large groups of students with disability can tend to fall under the 'other' category, but simply adding more classifications for students to identify with might not adequately address inherent flaws of such data collection to begin with. Although the issue of self identification accuracy is a complex issue to address, and classifications in line with those used in other comprehensive data sets, such as the survey of disability and carers centres, might assist in ensuring sufficient level of detail in accuracy in reporting is maintained over a period of time.   
  
The second recommendation is that universities must ensure inherent requirement statements are clear, transparent and in accordance with higher education framework, Disability Discrimination Act and Disability Standards for Education.   
  
IRSs have a need to be clearly described in revised to ensure they are ensuring the purposes of signalling the necessary capabilities, rather than acting as barriers to participation.   
  
The third recommendation we came up with was a pedagogical method, materials and technology should always adhere to the principles of the University and be made to provide a variety of options to engaging content.   
  
The fourth recommendation would be disability awareness training is made mandatory component of introduction materials and institution policy training for all administrative and academic staff, and again, for casual staff as well.   
  
The fifth recommendation was that the option for increased agency be provided for students as to the management and information disclosure for the disability. The requirement for students to disclose their disability is a significant point of concern and they need to self disclose confidentially.   
  
Recommendation six deals with the coordination of support services suggesting universities develop more holistic approaches to support students with disability providing study and organisational skills in conjunction with Learning Access Plans and in consultation with faculties and other educational support units such as Indigenous education units or Indigenous students disability.   
  
And for the final recommendation, we identified a need for support services and study terms to offer more flexible options for students with disability. I've just mentioned, some of the reports noted the disability and health services or supports are often only available on campus during office hours on week days and as such can be difficult for students who have multiple things they have to get to during the day, such as work and study, which would be generally during those hours the supports are available.   
  
Also, the OUA's 13 week continuous study period could be impediments for students with episodic interruptions, or those who need the break to consolidate what they have learnt. They could provide an opportunity for those to be continually engaged and don't do well for having large breaks.   
  
And finally, a few points of further research, areas identified for further research. For achievement and retention, Kilpatrick and Ganguly's reports noted research needed for student achievement and retention. The next one was that it was strongly recommended that research begun to get the optimal taxonomy for data collection and disability classification.   
  
The next one, Owen noted that particularly in regards to students with ASD, the evidence-based, most effective supports could be strengthened by further research into the student while Brett and his fellow researchers identified a further research could go along way to forming an office of inherent requirement statements for universities.   
  
We also identified employment outcomes are recently beginning to attract more research attention, but relatively little is known about the disadvantages associated with disability and how they contribute to inequitable graduate outcomes.   
  
And finally, Kilpatrick and (unknown term) Kent noted that the recruitment outreach erected towards students with disability might be lacking initiation participants, given they are the most under recognised groups.   
  
And finally, if you would like more details, the reports are in front of you or they are available on our website as well as the links through to the full report we conducted these reviews on which contain far more detail.   
  
(Applause)   
  
GENEVIEVE JACOBS:   
Thank you. I thought that was a really fascinating analysis. Are there any questions? We will get a microphone to you. We have a question down here.   
  
QUESTION FROM FLOOR:   
Hi, I apologise if you mention this at the beginning, but how will this report be distributed to universities, as there are a number of those recommendations that I'm sure a number of us would like to see implemented, but really unless the powers that be know about it and have the will to change it, it is not great to make the difference.   
  
PROF SUE TRINIDAD:   
As David Fintan from the Department of Education and Training mentioned this morning, there are a number of reviews and we do know that there will be some funding and consideration through those reviews. But we are waiting for the results for next year.   
  
So, yes, I imagine there is going to be some opportunities for universities to look more closely at what's happening with disability groups.   
  
GENEVIEVE JACOBS:   
Do we have another question? Lots.   
  
QUESTION FROM FLOOR:   
Matt Brett from La Trobe. Thanks for that, I think it is a really good report. David said this morning that students with disabilities are often the poor cousins of other equity groups and I'm just going to put it over here from the National service perspective, do you think that is a valid conclusion and what can be done to elevate the status of equity in higher education?   
  
IAN CUNNINGHAME:   
For 2015 funding round, we also came to that conclusion which is why we have made sure we had a specific focus on approving grants looking at student with disability because we saw that was a lack of research in this space.   
  
Going forward, the best thing we can do is continue. We have a few recommendations for further research there, we can also use our capacity to make sure we look into that research and make sure we are able to collect it and disseminated as well so that it stays front of mind.   
  
GENEVIEVE JACOBS:   
OK, and to you.   
  
QUESTION FROM FLOOR:   
I think the research, some of it recommended a flexibility to learning was encouraged, but also there was a contrast of inherent requirements need to be outlined in which I think sometimes would contrast each other. I was wondering if there were any recommendation solutions for a juxtaposition in the reports or in your own funding?   
  
  
IAN CUNNINGHAME:   
It was interesting. We held a forum on Monday, and at that forum I found out only 50% of universities use inherent requirement statements. There are quite a few universities who specifically mentioned they don't want to have inherent requirement statements because a better approach would be to make sure they have an inclusive environment so they don't have to indicate students the inherent requirements they need to study.   
  
So I guess, personally, I think that would be a good approach to approach it that way. But in terms of the study periods and how that would interact with inherent requirements that is, I suppose... I don't really have a good answer for that. It's a good question and something to look into. You might want to speak to Matt Brett himself, who was part of the report on inherent required statements.   
  
Also the link to the full report will be available on our website as well.   
  
GENEVIEVE JACOBS:   
You mentioned any number of times that Universal Design principals are missing, and I find that staggering. That goes to the lack of comprehensive information about students, it touched on the principles we heard about earlier this morning. It seems like right through the reviews, the common factor is there is a lack of standard or copper hence a framework.   
  
IAN CUNNINGHAME:   
Yes, when you think about Universal Design, there are some issues that are standard now, like captioning services. Online lectures being provided as video and audio files online. Wut there are other aspects that are taken into account, like I can remember almost every single unit I studied had group work components as mandatory. And that can present barriers for people with specific disability types.   
  
The fact it is mandatory in every single unit and there is no way to get around it, and that can often be a large percentage of your overall mark, so I think that some of the area of Universal Design which aren't really well thought out.   
  
GENEVIEVE JACOBS:   
And it leaves me to wonder, you have talked about when people have questions about disclosure, that if there are not universal principles, then why would they bother disclosing if they don't know whether the institution is going to do anything with it or I a But there are other aspects that are taken into account, like I can remember almost every single unit I studied had group work components as mandatory. And that can present barriers for people with specific disability types.   
  
The fact it is mandatory in every single unit and there is no way to get around it, and that can often be a large percentage of your overall mark, so I think that some of the area of Universal Design which aren't really well thought out.   
  
GENEVIEVE JACOBS:   
And it leaves me to wonder, you have talked about when people have questions about disclosure, that if there are not universal principles, then why would they bother disclosing if they don't know whether the institution is going to do anything with it or I am just labelling myself.   
  
Sorry, did you want... O have any other questions in the room? OK, look, let's thank Ian and Sue for a very concise and useful presentation.   
  
(Applause)   
  
GENEVIEVE JACOBS:   
Ladies and gentlemen, it has been a big, busy day. It's not quite over yet. The ATEND AGM will be held in the ballroom in about 11 minutes time at 4:45 PM.   
  
For those of you who are not going to the meeting, you have got about an hour or so to relax. These join us for the welcome reception tonight in ballroom for in the hotel foyer starting at 5:30 PM. It is the celebration of 25th Jubilee. There will be a cartoonist running around, which is an interesting touch for one of these events, drawing caricatures of the delegates.   
  
They will be displayed at the silent auction tomorrow and available for sale at five dollars per artwork with the proceeds going to ATEND, which is a great memento. OK, see you soon. Thank you very much.

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